DOCUMENT RESUME

ED 140 546 EC 101 159

TITLE	Adult Developmental Activity Program Manual.
INSTITUTION	North Carolina State Dept. of Human Resources, Raleigh. Div. of Mental Health Services.
PUB DATE	Feb 77
NOTE	208p.
EDRS PRICE	MF-$0.83 HC-$11.37 Plus Postage.
DESCRIPTORS	Adults; Custodial Mentally Handicapped; Mentally Handicapped; Physically Handicapped; Program Descriptions; *Program Development; Program Evaluation; *Program Planning; *Severely Handicapped; Trainable Mentally Handicapped; Vocational Development
IDENTIFIERS	*Adult Developmental Activity Program

ABSTRACT

Presented is a program manual for the Adult Developmental Activity Program (ADAP), a structured work oriented service for substantially retarded and/or severely physically handicapped adults. Program information is organized into four sections: ADAP minimum standards, initial program planning and development factors, information on the ADAP facility, and program content (including descriptions of client assessment, planning individual programs, and staff development). Twenty-nine appendixes cover such topics as articles of incorporation, techniques for developing subcontracts, affirmative action plans, medication policy, and individual goal plans. (CL)

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ADULT DEVELOPMENTAL ACTIVITY

PROGRAM MANUAL

State of North Carolina
Department of Human Resources
Division of Mental Health Services
Mental Retardation Section

Albemarle Building
325 N. Salisbury Street
Raleigh, North Carolina 27611

February, 1977

EC101159

ADULT DEVELOPMENTAL ACTIVITY

PROGRAM MANUAL

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USE OF THE A.D.A.P. MANUAL

For convenient use of this information and easy reference, it is suggested that this manual be bound in a three-ring notebook with index dividers marking the major components.

I. A.D.A.P. Minimum Standards

These Standards were approved by the North Carolina Commission of Mental Health in September of 1976 and shall be applied to all public and private programs which receive Division of Mental Health Services funds for an adult who is substantially mentally retarded and/or severely physically disabled. This copy of the Standards is double-spaced so that programs may note questions or suggestions. Since these Standards are considered for revision annually, any suggestions for modifications should be forwarded to the Adult Services Specialist at the address listed below.

II. Initial Program Planning and Development

This section is designed to be of particular assistance to new A.D.A.P.'s or communities seeking to develop an Adult Developmental Activity Program.

III. The A.D.A.P. Facility

This section should be of particular interest to new A.D.A.P.'s selecting a facility location and name, etc., but will also be useful to existing A.D.A.P.'s seeking to sophisticate their program and services.

IV. Program Content

This section describes the various components, programs and services that all A.D.A.P.'s should strive to provide at one level or another.

V. Appendix

This is obviously the most lengthy section of the manual and represents a compilation of materials that various committee members felt would be useful to A.D.A.P.'s in North Carolina. Where possible, the materials are arranged in the order that the subjects appear in the Standards. Please note that some Standards have several appendix items while others have none. (Standard # is noted to the left of appendix item in Table of Contents.) At the end of this section, several extra appendix items are listed along with a suggested reading list. Most of these appendix items are samples or suggested forms to be used as guides and modified to each program's individual needs. Possibly the most useful appendix item will be the ADAP INFORMATION CHECKLIST, a questionnaire designed to enable ADAP staff and outside consultants to identify various aspects of your program. This is included as a guide in program evaluation, Standard 18.

Questions or suggestions for revisions of this manual should be addressed to:

Adult Services Specialist
Department of Human Resources
Division of Mental Health Services
Mental Retardation Section
325 N. Salisbury Street
Raleigh, N. C. 27611

POSITION STATEMENT ON ADAP

' . . . When we take a man as he is, we make him worse; but when we take a man as if he were already what he should be, we promote him to what he can be . . .'

GOETHE

The mentally retarded person has the same right to growth and development as any citizen. He has the right to choose a place to live, to acquire and dispose of property, to marry and bear children, to vote, to an education, to engage in leisure time pursuits, to work and receive a fair wage, and due process; however, many of these rights have been, and continue to be, abridged.

The lack of privacy, lack of being involved in decisions affecting one's self, being ignored and not recognized as an individual, attending school or vocational training in unattractive environments, living in crowded conditions with an enforced and regimented way of life plus other subtle dehumanizing factors and events are a reality for mentally retarded people.

Mentally retarded persons have the inherent right to strive to fulfill their potential as human beings. Just as abilities of people in the general public vary, so do those of the mentally retarded individuals. It is possible to help all mentally retarded persons lead a richer and more dignified life regardless of the degree of their retardation.

We believe in providing services which give persons who are mentally retarded an opportunity to develop their potential, to become more self-sufficient and to attain self-confidence and dignity. The habilitation of an individual includes efforts to assist the individual in developing his potential vocationally and also in developing his maximum level of independent living.

If we are to prepare persons who are mentally retarded to live as independently as possible in the community, then we must provide them with a total learning environment, an environment that is conducive to integration and which diminishes those features which would tend to set them apart from society. Adult Developmental Activity Programs and clients should be integrated to the greatest extent possible with the general population.

An Adult Developmental Activity Program is a service for substantially mentally retarded and/or severely physically disabled persons which is designed to establish and/or maintain persons' behaviors and characteristics which are as culturally normative as possible by providing a structured program adaptable to each person's individual needs.

The basic criteria for the development of an ADAP are as follows:

a. contribute to increasing the complexity of the individual's behavior

b. contribute to increasing the individual's ability to control his environment

c. contribute to increasing the individual's self-control and maximizing those qualities which have been culturally designated as normal.

We believe that work should be the core activity of all ADAP programs and that the program, environment, routines, rhythms, and activities should be perceived as adult in nature by both the client and the general public. We recognize the need for adult basic education for those who need and can benefit from it, for counseling and special therapies, for personal and social adjustment training and for recreation.

The mentally retarded person must also have access to the community at large. The mentally retarded individual should be encouraged to use community recreation resources, such as movies, swimming pools, bowling lanes, shopping in community stores; classes and programs in community colleges; medical, dental and other professional services; use of public transportation; and work in as integrated work setting as possible.

Perhaps the most important aspect in defining ADAP involves the attitude of the people who assume the responsibility of providing these activity program settings. No human being can be expected to grow and flourish in an atmosphere which is rejecting, stifling, or de-humanizing.

The staff involved in providing an activity program must accept the clients as valuable human beings and as individuals. They must treat the client with the respect due to all human beings which is essential to their self-concept and dignity. Affording dignity means recognizing and honoring the individual's rights and his capacity for self-direction to the greatest extent possible within the limits of his handicap. The difference between dignity and de-humanization can range from the obviously blatant to the very subtlest means of communicating an attitude.

To give just a few implications of the concept of dignity in an ADAP, a client must be allowed the opportunity to participate in decisions effecting his life, genuine involvement in his or her individual goal planning, privacy, having personal possessions, freedom of movement, etc. To the greatest extent that an individual is capable of handling the responsibilities involved, he should be allowed to manage his money, selection of clothing and shopping for other items, have appropriate contact with the opposite sex, and experience the normal role of an adult, being treated according to his age. Dignity includes the right to take risks in community and personal experiences.

Most persons, no matter how handicapped, tend to strive to achieve what is expected of them. If the people in charge of the ADAP expect the client with whom they are involved to be trustworthy and do his very best, their expectations are likely to become realized.

Thus, a high expectance should be imposed in all ADAP's regardless of the degree of structure of independence involved in them. Expectancy is one of the most powerful means of modifying or changing behavior.

All persons should receive emotional support in the ADAP setting. A strong emphasis should be placed on supporting and providing a rich variety of experiences for the client. If the staff providing the ADAP are accepting and supporting of the client, this should be demonstrated by a willingness, hopefully an eagerness, to cooperate with other agencies and groups involved in serving and meeting the needs of the clients.

In order for mentally retarded people to fit into society, as inconspicuously as possible, and not stand as being "different", we must expose them to a "normal" life style. Any program including mentally retarded people should establish a setting which provides a normal rhythm of the day; awakening, eating meals, working, and sleeping, at the same times that other people in society do these things. A normal rhythm of the week should also be established, leaving the place of residence to work, attend school and recreate, as other people in our society do. This implies a separation of the function, as it is not normal in our society for people to live and work in the same setting or to spend all their leisure time in the same facility in which they live and work. In other words, we should make available to the client in an ADAP the same patterns and conditions of every day life, and devise a schedule so the activity, routines and rhythms are close as possible to the norms of society.

Clients should be encouraged to contact other non-retarded people in the community. As previously stated, the client should be encouraged to participate in constructive leisure time activities and to make use of community resources to the extent that each individual is able.

Lastly, discretion must be used in determining which responsibilities and freedoms any one person can reasonably be expected to handle. Very realistically; some mentally retarded people are not prepared to cope with all of the responsibilities involved with individual rights and freedoms which have been outlined. Goals must be determined individually and realistically so that we do not set people up to fail. Again the client should share in the selection of their own goals. Always remember their right to try, and that there is dignity in risk.

"I hear and I forget, I see and I remember, I do and I understand."

ADULT DEVELOPMENTAL ACTIVITY PROGRAM

MINIMUM STANDARDS

DIVISION OF MENTAL HEALTH SERVICES

MENTAL RETARDATION SERVICES

ADULT DEVELOPMENTAL ACTIVITY PROGRAMS

MINIMUM STANDARDS

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A. Applicability of Standards

The standards shall be applied to all public or private programs which receive Division of Mental Health Services' funds for an adult who is substantially mentally retarded and/or severely physically disabled.

B. Method of Review

The following method of review has been suggested by the ADAP Standards Committee. This review program will be used on a pilot basis with one randomly selected ADAP from each region for fiscal year 76-77. Modifications of the review process will be made based on the experience of the first year of operation. (Only ADAPs requesting evaluation will be considered.)

The following represents what the ADAP Standards Committee feels is the most effective method of review.

Program evaluations will be conducted by an assessment team which shall include:

1. An out-of-region Regional Mental Retardation Specialist as Chairman
2. Regional Mental Retardation Specialist
3. Area Mental Retardation Specialist

Requested Persons

1. Local Department of Social Service Representative
2. Representative North Carolina Association of Sheltered Workshop
3. Regional Vocational Rehabilitation Workshop Specialist
4. Representative Developmental Disabilities Training Institute

Since program assessments are intended to be both educational and evaluative, reviews shall be conducted annually. Before the on-site visit, the ADAP Director shall mail to assessment team a written description of the program's compliance to ADAP Standards. This program description will include the ADAP's self-evaluation check list and accompanying descriptions requested

therein. The ADAP is also allowed and encouraged to express its strengths in areas not covered by the standards. During the on-site visit, the assessment team shall interview and observe both staff and clients. All aspects of the program shall be observed, inspected and reviewed to effectively determine if the ADAP meets the requirements of the Standards.

Immediately following the review the team shall prepare a written summary and report of the review which shall state the findings of the review team. The report shall outline those areas where standards are not met and outline positive action to be taken by ADAP staff in meeting the standards. The report shall be forwarded to:

1. Workshop Director where applicable
2. ADAP Coordinator
3. Governing Body of ADAP
4. Review Team Participants
5. Other deemed necessary by the Review Team Participants

MENTAL RETARDATION SERVICES

ADULT DEVELOPMENTAL ACTIVITY PROGRAMS

MINIMUM STANDARDS

Introduction

Adult Developmental Activity Program means the provision of an organized program of developmental activities for mentally retarded adults 16 years of age and older in a facility that meets both program and facility standards established by the Division of Mental Health Services. Included are the provisions of services and activities designed to establish and/or maintain persons' behavior and characteristics which are culturally normative as possible by providing a structured program adaptable to each persons' individual needs. Based on a formal evaluation of each client, an individual goal plan is written with client involvement. Training in self-help skills, communication, social adjustment, vocational adjustment and functional academic training may be included as needed and appropriate for the client.

The following document has been prepared by the North Carolina Department of Human Resources (Division of Mental Health Services, Division of Social Services, Division of Vocational Rehabilitation Services) and the North Carolina Association of Sheltered Workshops as a statement of minimum standards acceptable for the operation of an Adult Developmental Activity Program. Other purposes include:

1. To evaluate the quality of existing ADAPs
2. To teach desirable program practices
3. To indicate what constitutes adequacy of service treatment in an ADAP
4. To provide guidelines for improving inappropriate and insufficient programs and,
5. To aid in planning of new services

For the purpose of this document, shall indicates a requirement. Should indicates a recommendation. A standard is something established by authority, custom, or general consent as a model or example: something set up and established by authority as a rule for the measure of quantity, quality, and value. A factor is a method employed to further explain and interpret the contents of a specific standard. A factor may be a standard in its own right depending upon whether the words "shall" or "should" are employed within its context.

Definitions

Severely Physically Disabled Person is defined as a person who has:

(1) a severe physical disability which seriously limits his functional capabilities (mobility, communication, self-care, self-direction, work tolerance or work skills) or

(2) who has one or more physical disabilities resulting from amputation, arthritis, blindness, cancer, cerebral palsy, cystic fibrosis, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders, paraplegia, quadriplegia, and other end stage renal disease and

(3) whose habilitation or rehabilitation can be expected to require multiple habilitation or rehabilitation services over an extended period of time.

Mental Retardation

At present, the most widely accepted definition of mental retardation is that of the American Association on Mental Deficiency (AAMD), adopted in 1973:

> Mental Retardation refers to substantially sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period.

It should be noted that, according to this definition, onset of mental retardation must occur during the "developmental period"--typcially interpreted as anytime until 18 years of age. An adult who is brain-damaged in an automobile accident, then, would not fit the definition.

"Substantially sub-average general intellectual functioning" has been interpreted as two standard deviations below the norm, or approximately IQ 70 or below.

Deficits in "adaptive behavior" can be measured by a scale such as the Vineland Social Maturity Scale.

"Existing concurrently with" indicates that all three factors must be present. That is: 1) sub-average intellectual functioning, 2) deficits in adaptive behavior, and 3) manifestation during the developmental period.

Substantially Mentally Retarded Person is defined as a person:

(1) who is mentally retarded to the degree of seriously limiting his functional capabilities (mobility, communication, self-care, self-direction, work tolerance or work skills). This includes the following categories of persons:

a) moderately mentally retarded persons

b) severely mentally retarded persons

c) profoundly mentally retarded persons who are capable of participating in the program;

d) mentally retarded persons who are found by a vocational evaluation to be incapable of functioning in a vocational adjustment training program or sheltered employment for specified reasons; and

(2) whose habilitation or rehabilitation can be expected to require multiple habilitation or rehabilitation service over an extended period of time.

Adult Developmental Activity Program is defined as:

a service for substantially mentally retarded and/or severely physically disabled persons which is designed to establish and/or maintain persons' behaviors and characteristics which are culturally normative as possible by providing a structured program adaptable to each person's individual needs.

The Standards

A. Organization and Administration Standards

Standard 1. The ADAP operated by a community mental health center shall develop an advisory board.

Factor 1: The advisory board shall develop a constitution and by-laws.

Factor 2: The advisory board shall assist by:

a. reviewing regular reports from the ADAP;

b. maintaining minutes of each meeting, copies of which are shared with the mental health center;

c. keeping informed about developments affecting the lives of clients in the ADAP;

d. periodically visiting the ADAP to observe the program in operation;

e. contributing experience to promote the continued success of the ADAP; and

f. making recommendations to alleviate conditions which oppose the philosophy and standards under which the ADAP is established or should be operated.

Factor 3: The advisory board shall meet at least quarterly with described provision for special meetings.

Factor 4: The advisory board shall elect a chairperson.

Factor 5: The advisory board membership shall be subject to the approval of the local mental health authority upon recommendation of the ADAP director.

Factor 6: The advisory board should participate in the annual ADAP evaluation

Factor 7: The advisory board shall consist of at least five members representing a broad spectrum of the community.

Standard 2. The ADAP operated by a private non-profit corporation shall be legally constituted under the provisions of the North Carolina Non-Profit Corporation Act.

Factor 1: The articles of incorporation, by-laws, or constitution shall:

a. describe the purpose for which the corporation is organized;

b. provide a governing body;

c. describe membership for the governing body;

d. describe procedure for selection and tenure of and removal from office of members of the governing body;

e. describe the responsibility and duties of each officer;

f. describe method of amending the by-laws;

g. describe provision of assets should the corporation dissolve; and

h. provide that the governing body be responsible for the formulation and implementation of overall policy.

Factor 2: The membership of the governing body of a non-profit corporation should be broadly representative of the community.

Factor 3: The membership shall meet at least quarterly with described provision for special meetings.

Factor 4: Members shall serve without pay.

Factor 5: No financial benefit or conflicts of interest shall arise as a result of membership on the governing body.

Factor 6: Minutes of all official meetings shall be maintained.

Factor 7: The governing body shall be responsible to see that an annual evaluation of the ADAP is conducted.

Factor 8: The governing body shall exercise general supervision and establish policy regarding property, funds, management and operations.

Factor 9: The governing body shall ensure the following:

a. that an annual budget is prepared that adequately meets the needs of the program;

b. that accounting practices are in accordance with generally acceptable accounting procedures;

c. that the financial records identify each ADAP expense;

d. that the financial operation of ADAP is audited annually; and

e. that sound, ethical business practices are observed in the purchasing of equipment, supplies, and services.

Standard 3. The ADAP shall be certified by a regional mental retardation specialist, Division of Mental Health Services.

Standard 4. A full-time coordinator of the ADAP shall be designated and this person's duties and responsibilities shall be clearly defined in writing.

Factor 1: The full-time director or coordinator should have a college degree and one year of experience in mental retardation programming.

Factor 2: The ADAP director's or coordinator's position shall carry responsibility and the authority necessary to achieve and maintain compliance with ADAP standards.

Factor 3: The ADAP coordinator or director shall be authorized, with client involvement, to place clients in workstations or activity areas in order to carry out the program plans.

Standard 5. The ADAP shall have a Manual of Personnel Policies and Procedures.

Factor 1: The manual shall contain information dealing with conditions of employment, position classification, job description, promotion opportunities, fringe benefits, sick and vacation leave, workmen's compensation, a personnel grievance system, and severance procedure.

Factor 2: Each employee shall be given a copy of the manual when beginning work in the ADAP.

Standard 6. A personnel record shall be maintained for each employee which should include job application, references and other appropriate information.

Standard 7. The ADAP shall have a staff orientation and in-service training program.

Factor 1: The coordinator or director of the ADAP shall coordinate orientation and resources in order to promote job performance of new personnel.

Factor 2: The design of the in-service training program should be to improve the performance of personnel in their present assignment and to facilitate their movement to new assignments.

Factor 3: The planning and design of all in-service training should be based on periodic assessments of future staff needs and of current staff competencies.

Standard 8. The coordinator of the ADAP shall observe ethical, sound business practices.

Factor 1: In bidding contracts, 100% of the cost including labor and overhead shall be included in bid price. If programs provide supplies, material, or tools they shall be added as a separate cost of bid price.

Factor 2: Wages paid to ADAP clients shall be on a piece rate or hourly commensurate wage.

Factor 3: Persons whose earnings are more than half of minimum wage shall not receive Mental Health grant-in-aid subsidy.

Factor 4: Prices for products produced in the ADAP shall be equal to or exceed the cost of production (including commensurate wages, overhead, tools and materials).

Factor 5: The ADAP shall develop a system of quality control on manufactured and sub-contract goods.

Factor 6: Contract bidding practices, selling prices, and wage rates shall be reviewed at least annually by the staff and governing body.

Standard 9. The ADAP shall comply with appropriate local, state, and federal laws and regulations.

Factor 1: Each ADAP program utilizing sub-contract work or the manufacturing of goods to be sold shall be subject to the Fair Labor Standards Act and shall make application to the U. S. Department of Labor for Work Activities Center (WAC) certificate.

Factor 2: Compliance with Wage and Hour regulations shall be documented and available.

Factor 3: Each person involved in productive work shall receive a written statement for each pay period which indicates gross pay, hours worked and deductions.

Factor 4: Each person shall be paid at a rate equal to his productivity through either a piece rate or hourly wage system.

Factor 5: Work being performed away from the ADAP by clients shall meet all state and federal regulations relative to wages commensurate to that performed by a non-handicapped person doing the same job.

Factor 6: ADAPs that have a work component shall comply with the Fair Labor Standards Act which prohibits minors between 16 and 18 years of age to operate hazardous equipment such as power-driven woodworking machines.

Factor 7: An ADAP that uses sub-contract or manufacturing work as a part of its program shall file a waiver certificate (Form SS-15, 15A) as applicable with the Internal Revenue Service and pay Social Security on all clients whose earnings amount to $50.00 or more during a calendar quarter.

Factor 8: The facility shall comply with the Civil Rights Act of 1964 and appropriate laws, rules and regulations regarding civil rights.

Factor 9: The ADAP shall be in compliance with OSHA (Occupational Safety and Health Act) regulations.

Factor 10: Each ADAP should make every effort to see that the client population is provided a hot, nutritious meal. All kitchen and cafeteria facilities shall be maintained in accordance with health standards and shall not operate with a sanitation grade lower than "B".

Factor 11: Each ADAP shall meet "privilege" and "use" license requirements as set forth by local and state tax authorities.

Standard 10. Each ADAP shall eliminate architectural barriers which prohibit access to the building and use of the equipment and facilities.

Factor 1: Each new ADAP structure shall be in compliance with the Handicapped Section of the North Carolina Building Code.

Factor 2: Each existing ADAP structure shall eliminate architectural barriers.

Standard 11. Each ADAP shall have an adequate space for classroom activities.

Standard 12: The ADAP shall prevent unreasonable risk to clients and staff and shall maintain the facilities in such a manner as to provide the best possible environmental conditions for the clients.

Factor 1: A safety committee comprised of staff members and client representatives shall be appointed and shall meet on a quarterly basis.

a. Minutes shall be kept on all meetings and submitted to the director with recommendations for needed changes.

b. A plan shall be established for the review of accident reports by the Safety Committee.

Factor 2: The ADAP shall be inspected annually by an outside safety consultant with written documentation and follow-up on recommendations.

Factor 3: The ADAP shall be inspected annually by an outside safety consultant with written documentation and follow-up on recommendations.

Factor 4: There shall be an educational program for staff and clients which involves them in the principles of accident prevention and control of specific hazards. This program shall include:

a. fire drill on a monthly basis;

b. an evacuation plan in compliance with local fire regulations; and

c. training for clients in personal safety habits including work and environmental safety.

Factor 5: A first aid kit shall be available for the ADAP. One or more staff member(s) shall hold a certificate for successful completion of an approved first aid course.

Factor 6: The ADAP facility shall have a minimum of 60 sq. feet of activity space per client, unless exceptions to said ratio are made by the appropriate authority.

Factor 7: All necessary steps shall be taken to provide adequate lighting, ventilation, temperature control, toilet facilities, and drinking fountains.

Factor 8: All hallways, doorways, entrances, ramps, steps, and corridors shall be kept clean and unobstructed at all times.

Factor 9: The facility shall be kept attractive and provide an interior that creates an atmosphere for training.

Factor 10: Provisions shall be made for proper fire, public liability, workman's compensation, and fidelity bonding insurance coverage.

Standard 13. The ADAP shall have a written policy specifying the procedures to be followed in case of injury or medical emergency.

Factor 1: A formal plan shall be established for the reporting of all accidents that occur during ADAP activities, whether or not they give rise to injuries requiring medical treatment. The accident report shall contain but not be limited to the following information:

a. identification of person(s) involved;

b. place of accident;

c. time of accident;

d. name of responsible supervisor present;

e. circumstances under which accident occurred, such as equipment in use at time, type of operation being performed, etc;

f. description of first aid services given to any injured person; and where client sent or taken, time of departure from ADAP, and means of transportation used.

Factor 2: A plan for obtaining medical services, including emergency services, shall be documented with specific steps delineated.

Factor 3: The ADAP shall have a designated physician or emergency room service available.

Standard 14. The ADAP shall have a written policy regarding medications administered at the ADAP facility.

Factor 1: The ADAP shall have a systematic training program to help each client become self-reliant regarding drug administration.

Factor 2: All medications shall be properly labeled.

Factor 3: All medications shall be stored in a safe and proper environment.

Factor 4: Proper documentation shall be written in the client's record identifying prescribed medication including:

a. current medication order with directions for use;

b. any known medication allergies; and

c. the client's ability to administer his own medication.

Standard 15. The ADAP shall have a written grievance policy and procedure whereby ADAP clients, their parents or guardians may present their problem or grievance and obtain a prompt, fair settlement through an orderly process.

Factor 1: The grievance procedure shall include but not be limited to the following steps:

a. discussions between the ADAP client and his immediate supervisor;

b. appeal to the ADAP director;

c. written documentation of problem and recommended action to be taken by parties involved;

d. appeal to the supervisor of the ADAP director; and

e. appeal to the governing body, i.e. board of directors or mental health center.

Standard 16. The ADAP shall make all reasonable efforts to ensure protection of the legal rights of clients.

Factor 1: Clients and staff shall be educated about the rights of the mentally retarded as full citizens of the U.S.

Factor 2: Clients shall be counseled concerning their rights and responsibilities as participants in the program in areas such as wages, hours, working conditions, social security, redress for injury, and the consequences of his or her own tortious (wrongful act) unethical conduct.

Factor 3: The ADAP shall, if necessary, seek out legal representation for the client when the client has been wronged or has committed a crime or violated the legal rights of another.

Standard 17. Each ADAP shall make every effort to see that the transportation needs of every client are met.

Factor 1: Clients involved in the ADAP shall be encouraged to use public transportation if available.

Factor 2: If the ADAP provides transportation, additional responsibility for the health and safety of the participants shall be assumed as follows:

a. Each person transported shall have a seat and remain seated while the vehicle is in motion;

b. no more than one hour of driving time one way shall be permitted for each person, unless an individual situation(s) dictates extreme difficulty;

c. adequate and safe facilities shall be provided for the boarding and discharging of persons;

d. persons in a vehicle shall be protected by liability insurance;

e. a qualified and responsible driver meeting Department of Motor Vehicles and insurance agency requirements shall be employed or designated; and

f. any person transporting clients shall have a chauffeur's license.

Factor 3: If public transportation is not available, relatives, advocates and friends should be encouraged to provide transportation if possible.

Standard 18. Each ADAP shall be reviewed annually by appropriate staff within the Department of Human Resources.

Factor 1: This review shall include at least the following:

a. stated goals and objectives of ADAP;

b. progress of the client that is specified in individual goal plans;

c. evidence of availability of services to meet needs of client population;

d. evidence that appropriate alternatives and options exist within the system to meet varied needs of the client;

e. involvement of the client and, where appropriate, the advocates and/or friend of the client in the opportunities to choose among the available alternatives and options;

f. evidence of cooperative efforts among agencies and service providers to achieve common goals to one another;

g. documentation of efforts to facilitate maximum coordination among funding sources with respect to licensing requirements, required reports, and accountability requirements.

B. General Service Standards

Standard 19. The purpose and objectives of ADAP shall be set forth in writing. These purposes and objectives shall include:

a. to provide remedial care and therapeutic activities;

b. to involve the family and/or sponsoring agency in the program when possible;

c. to provide an opportunity for personal enrichment;

d. to provide an opportunity for leisure time activities;

e. to enhance personal and social adjustment;

f. to develop community living skills such as mobility, personal safety, shopping, eating in public, communication, self-care, self-direction, etc.;

g. to develop pre-vocational skills such as manual dexterity, attention to tasks, care of tools and materials, acceptance of supervision, occupational exploration, etc.; and

h. to provide an opportunity to move from ADAP to other programs oriented towards higher levels of individual functioning, including social and work skills.

Standard 20. The activities and services of the ADAP shall be set forth in writing.

Standard 21. The ADAP shall have an admission committee.

Factor 1: The admission committee should consist of the program director, evaluator, sponsoring agency(s), VR counselor, interagency council representative and other appropriate persons. Clients, parents and/or guardian shall receive a pre and post admission consultation.

Factor 2: The admission committee shall meet for a pre-admission staffing regarding each person that is considered for admission.

Factor 3: The criteria and procedure for admission to the ADAP shall be as follows:

a. the client shall be severely physically disabled or substantially mentally retarded as defined in this document;

b. the client shall be 16 years of age or older;

c. the client shall be referred to VR with written documentation of this referral;

d. a letter from the VR counselor shall be received recommending placement in the ADAP;

e. the client shall be certified by the area mental retardation specialist based on the VR counselor's recommendation; and

f. steps c, d, and e shall be repeated as appropriate, but at least annually.

Factor 4: A general medical, psychological, and social history shall be available at the pre-admission staffing.

Factor 5: The pre-admission staffing report shall be documented in the client's file.

Standard 22. The ADAP shall have a client handbook which includes information that the client should know about the program.

Factor 1: The client handbook should be written in a manner comprehensible to the client.

Factor 2: Each client shall be given a handbook. It shall be thoroughly reviewed with the client, and when possible the parent and/or guardian.

Standard 23. The ADAP shall operate at least six (6) hours per day, five (5) days per week.

Standard 24. One staff member to each ten (10) or fewer clients shall be required in order to provide an adequate ADAP.

Factor 1: ADAP service shall specify in writing how each member of the staff counted in staff/client ratio is involved in providing services to ADAP clients.

Factor 2: Duties and responsibilities of staff shall be clearly defined in writing.

Standard 25. The ADAP shall have a written provision outlining criteria by which a client may move from ADAP to another level of service.

Standard 26. The ADAP shall document all discharges or suspensions from the program.

Factor 1: Reasons for discharge and the service to which the client was referred shall be included in the discharge summary.

Factor 2: The criteria and procedure for discharge from the ADAP shall be as follows:

a. discharge shall be the result of routine staffing processes and/or the result of annual assessment as outlined in the procedure described in Standard 21, Factor 3, item c, d, and e; or

b. if it has been found that an alternative program or placement is deemed more appropriate to meet the needs of the client; or

c. if it has been found that a person has behavior judged to be potentially harmful to other persons, this may constitute grounds for dismissal.

Factor 3: Suspensions shall be for a specified time and reported to the appropriate sponsoring agency(s).

C. Evaluation Standards

Standard 27. Each ADAP program shall have an on-going client evaluation program outlined in writing and stating the purposes and techniques.

Factor 1: An ADAP operating within a sheltered workshop that meets the requirements and standards established in the Norms for Sheltered Workshops Affiliated With and Utilized by the North Carolina Division of Vocational Rehabilitation Services shall be an approved ADAP evaluation program; however, a sheltered workshop may elect to provide ADAP evaluation program as outlined below.

Factor 2: Each individual referred to the ADAP shall receive evaluation services. In the event that the client has completed an evaluation program at another institution or sheltered workshop within the last year, a copy of the facility's evaluation report may be substituted.

Factor 3: The evaluator may use local resources for obtaining evaluation data such as psychological reports, medical reports and social histories or may use other sheltered workshop evaluation reports.

Factor 4: The ADAP shall have a separate room available for the evaluator to do testing, counseling, report writing and to hold client staff meetings.

Factor 5: Each evaluator shall have no more than ten (10) clients enrolled in the evaluation program at one time.

Factor 6: One staff person in the ADAP shall be designated as the evaluator of the program.

Factor 7: The evaluator should have a college degree and have completed at least one short-term training program in

vocational evaluation. The evaluator shall have a high school diploma and shall complete an in-service training program in vocational evaluation.

Factor 8: A written evaluation report shall appear in the client's file.

Factor 9: The ADAP evaluation report shall consist of the following information:

a. a short summary of the client's background, intellectual functioning, medical history, and reason for referral to the program;

b. present social environment and family situation;

c. a list of specific physical, educational, social and behavioral problems encountered in the evaluation program;

d. observations of the individual's work habits and social interactions;

e. interpretation of instrument results. Those instruments recommended are:

1. Progress Assessment Chart of Social Development (H.C. Gunsburg);

2. Adult Activity Center Rating Form (Developmental Disabilities Training Institute);

3. Classroom Rating Form (Developmental Disabilities Training Institute); and

4. other instruments as deemed appropriate;

f. a summary outlining the client's progress, strengths, weaknesses, and potential growth; and

g. a recommended plan which shall attempt to meet the client's needs in all areas of functioning.

Factor 10: Reports of staff meetings indicating the date of the meetings, participants, subjects discussed and the results of the meeting shall appear in the client's file.

Factor 11: Needed service not available in the Adult Developmental Activity Program shall be provided by other agencies or resources as indicated by evaluation.

Factor 12: Clients shall be referred to generic and specialized services appropriate to meeting their medical, social and educational needs.

Factor 13: The evaluation report shall be completed and in the client's file within 60 days after admission into the ADAP.

Factor 14: An annual re-evaluation shall consist of:

a. a general written summary of the client's yearly progress to date, to be done by the evaluator and/or coordinator;

b. subjective instruments correlated with the original as needed; and

c. individual goal plans developed by the instructor and coordinator, including methods, techniques and community resources to be utilized toward achieving the goals.

Factor 15: A copy of the re-evaluation report shall appear in the client's file.

D. Individual Program Plan Standards

Standard 28. An individual program plan shall be developed for all persons.

Factor 1: The model for preparing individual plans shall be "Individual Goal Planning for the Mentally Retarded" as endorsed by the Division of Mental Health Services.

Factor 2: The individual plan shall include the four major points of goal planning including:

a. an assessment of what the person can do;

b. the use of small goals to reach larger goals;

c. a statement of who will do what and when; and

d. involvement of the person from the beginning.

Factor 3: The ADAP shall adopt a standardized form for individual goal plans.

Factor 4: Client records shall indicate a monthly review of the goal plan.

Factor 5: The goal plan shall serve as a basis for monitoring and evaluating progress of individuals in the program.

Factor 6: The goal plan shall be developed with the instructors, the client and related staff as appropriate.

E. Record and Report Standards

Standard 29. The ADAP shall establish and maintain a separate record on each ADAP client.

Factor 1: Each record shall include the following information and reports:

a. referral and intake information;

b. medical;

c. psychological;

d. social history;

e. release of information;

f. pre-admission staffing report;

g. behavior observation reports;

h. evaluation report;

i. rating forms and profiles (i.e. PAC);

j. individual goal plans;

k. monthly goal plan reviews;

l. annual re-evaluations;

m. semi-annual client progress report;

n. conference notes;

o. documentation of agency referrals, etc.;

p. documentation of accidents, attendance, productivity and wages; and

q. discharge summary.

Factor 2: All reports shall be dated and signed by responsible staff persons.

INITIAL PROGRAM PLANNING AND DEVELOPMENT

PROGRAM PLANNING AND DEVELOPMENT

GETTING ORGANIZED AND ESTABLISHED

Initial Planning Stages/Administration and Organization

The initial planning stage is an important period in the development of the program. Through careful and thoughtful planning much time and money can be saved which would otherwise be lost, undetected. Anyone responsible for developing an Adult Developmental Activity Program (ADAP) should contact a number of particular agencies and individuals to develop support, interest, and an awareness of what the program is all about. Through these contacts, a written "Needs Assessment" should be completed to substantiate a real need for an ADAP. (See Appendix for sample "Needs Assessment".) Agencies which should be involved are:

Division of Mental Health

The Local Area Mental Health Program has the responsibility of monitoring the state's ADAP standards as well as being the channel for ADAP subsidy monies. Each MHP should have an individual known as the Area Mental Retardation Specialist. (This person is probably already involved -- but if they are not involved their role will require them to be involved.) In some Mental Health Areas, the ADAP is actually part of the Mental Health Program.

The Area MR Specialist is liaison between the ADAP and Regional Specialist, (the Area Specialist is responsible to the Regional Specialist for certain reporting.) The Regional Specialist can be of assistance, but generally, even after the ADAP is developed, this individual is not involved with the program itself-except through the Area Specialist, or through reviewing the program.

Division of Vocational Rehabilitation

Your first contact in VR should be the Workshop Specialist. Get this person's advise and support even if he or she cannot commit money. The specialist works more closely with ADAPs and sheltered workshops than any other VR person in the state, and is a tremendous resource for information and ideas. To get the name of the VR specialist serving your area, contact your local VR office.

Plan a meeting with the local VR Supervisor and counseling staff, in which you discuss the planned ADAP. (VR Counselors cannot sponsor clients in an ADAP, but can refer clients who are appropriate. Also, they must screen all applicants to the ADAP, whether VR Clients or not.) A good working relationship with the counselors is helpful.

Department of Social Services

Contact the Director of the County Department of Social Services and explain the program plans. Discuss Title XX eligibility, Title XX payments for ADAP services, as well as transportation and subsidies for food preparation. Since ADAP training services are subsidized through a contract between the Division of Mental Health and Division of Social Services at the state level, check with the area MR specialist before visiting.

North Carolina Association of Sheltered Workshops (NCASW)

By contacting the Association President (get his/her name from the Workshop Specialist) you can be placed on this organization's mailing list. This association has made a

provision for ADAPs (which meet the Department of Labor definition of a Work Activity Center) to become members at no fee for the first year of the ADAP's operation.

Attend the regular meetings. You can get a lot of excellent information to help develop your program. Visit as many ADAPs and workshops as possible.

Public Schools

The Director of Special Education will have referrals, both of students who are currently in school who will need ADAP services, and adults who are at home with no service.

Community College or Technical Institute

The community college or technical institute is in a position to help the ADAP in a number of ways.

It can, for instance, provide staff, (adult basic education, and personal and social adjustment, as well as instructors, coordinator and evaluator). They can also purchase texts and materials for evaluation and classroom use. There are several ADAPs in North Carolina which are housed in technical institute or community college buildings.

Interested Citizens

Look for community support: church groups, Exchange Clubs, Lion's Clubs, Civitan Clubs, Elks, Moose, J.C.'s, etc. Arrange to present a talk with audio-visual aids and provide as many facts as possible about the need for an ADAP in the community.

County Commissioners

Make sure that the County Commissioners are aware of the program throughout its development. County Commissioners

generally provide assistance to ADAPs in North Carolina, either through a direct annual allocation or other means.

A PLAN OF ACTION

One of the first duties is to develop an Ad Hoc Committee of interested persons, including many of the people that have been contacted in the community.

An organized group may be representative of many interests in the community, and these present members may become the "core" of an eventual Board of Directors or Advisory Board.

It is suggested that the committee have at least 15 members and not more than 25 members. Possible members should include:

Director, DSS or appointee
Superintendent of Public Schools or appointee
Director of Public Health or appointee
Member of Area Mental Health Board
Area Mental Health MR Specialist
Director, Department of Recreation or appointee
ARC President
County Commissioner
An attorney and/or an accountant
Several laypeople - members who are parents of MR persons
Several members from business and industry
(i.e., plant managers, personnel managers)
Others who may show interest or are felt to have influence in the community.

A copy of this Adult Developmental Activity Program Manual should be available to the members of the Ad Hoc Committee. Each member should read the manual, and the Committee should keep copies available for reference.

The Ad Hoc Committee can go in one of two directions with the organization of the ADAP. One direction involves the placing of the ADAP within the Area Mental Health Program. The other direction involves setting up the ADAP under a private, non-profit Board. (See Appendix.)

In the case of the ADAP which is placed under the Area Mental Health Program the Ad Hoc Committee might become an Advisory Board to the Director. In the case of the ADAP which is organized under a private, non-profit board, the Ad Hoc Committee might become the Board of Directors.

Suggested committees of either board are:

Personnel
Building and Grounds
Finance/Transportation
Public Relations
Industrial/Business
Governmental/Legal
Program/Safety

Factors which need to be considered by both Boards of Directors and Advisory Boards are:

Personnel

A. Job Descriptions (See Appendix)

B. Start-up Staff

1. Director
2. Instructor
3. Secretary - Bookkeeper

C. Director should select other staff

Building and Grounds

A. Survey Community for sites

B. Looking at specific buildings

1. Size
2. Building design
3. Layout of areas (i.e., activity, office)
4. Architectural barriers
5. Environmental (i.e., heating, cooling, etc.) factors
6. Architectural soundness
7. Location and zoning
8. History

C. Options -- lease? purchase?

Public Relations

A. Media coverage

1. news-worthiness of opening
2. on-going news efforts

B. Through supporters - (word-of-mouth)

C. Speaking to clubs and organizations

1. use of audio-visuals
2. speaker's bureau?
3. pamphlets and materials

D. NORMALIZATION - respect the dignity of persons being served in any publicity.

Transportation

A. Location of clientele (what is needed?)

B. Public transportation?

C. Separate transportation system?

D. Financing transportation?

E. Agreements with other agencies?

F. Parents and relatives?

Industrial/Business (See Appendix)

A. Contacts for subcontracts

B. Sound business practices

C. Sources of work:

1. subcontracts with businesses
2. prime manufacturing items
3. service contracts
4. others - repairing, retail, etc.

Governmental/Legal (See Appendix)

A. Articles of Incorporation - non-profit status
B. Employees Identification Number (Federal State)
C. Exemption for non-profit corporation (IRS)
D. F.I.C.A. Withholding (SS 15, SS 15a)
E. Workmen's Compensation
F. Insurance
G. Wage and Hour (U.S. Dept. of Labor) Certificate
H. Licensure (state, local, use and sales)
I. Building Code regulations
J. OSHA
K. Zoning regulations

AN ADULT DEVELOPMENTAL ACTIVITY

PROGRAM FACILITY

THE ADAP FACILITY

The public will associate certain types of buildings with certain types of age groups. Thus, some buildings clearly look like schools and we tend to associate them with children. Other building complexes look like colleges and universities - which we strongly associate with young adults. Yet other buildings look like factories - which we associate with mature adults. Just as a service project should be located in a building perceived to be appropriate to the age of its clients, so should the internal design of the facility be age-appropriate. This applies to both functional features of the facility, as well as the relatively non-functional aspects such as decorations and mood-setting features. Of course, one of the most common errors here is condescending child-associated decoration of buildings which are being used by retarded adults.

Wolf Wolfensberger
Program Analysis of Service Systems

Name

The title of an Adult Developmental Activity Program should reduce stigma to as great an extent as possible. It should, therefore, be as innocuous in its meaning as possible. Names such as Swepsonville Industries, Inc., Coastal Industries, Inc., or even Market Street Shop would be acceptable.

A title such as Coastal Industries, Inc. will be normalizing both for the staff and the clients involved in the program. The title implies only that this is a place where work is done. That is all the designate title needs to do, or should do.

Along similar lines, an ADAP which does work should list itself in the yellow pages of local telephone directories as an industry specializing in packaging, collating, hand assembly, etc.

Size

An ADAP should limit itself to only as many clients as it can effectively serve. Keep in mend, that an ADAP need not be located entirely in one facility, but may develop satellite facilities which are administered out of the main facility.

Location

Physical isolation of settings should be avoided. An ADAP should be designed and located as to be physically integrated into the community, encourage maximal social integration of the person served in and by them, and provide client users with a wide range and large numbers of normalizing experiences. Further, the location should be value enhancing for the participants (e.g. location in an industrial park area or a downtown storefront building).

Thus, building perception should seriously be considered when selecting the location of an ADAP. Administrators must be aware that physical location of a service can convey all sorts of symbolic and devaluing meanings. Therefore, location on hospital grounds (conveys sick image) or next to graveyards (death) should be definitely be avoided, as well as church basements (holy innocent-charity image), abandoned schools (eternal child image), or old homes for the alcoholic. Location within a cluster of (or near other) human services such as Social Services, Mental Health, Children's Programs, Public Health, etc. should also be avoided.

ADULT DEVELOPMENTAL ACTIVITY

PROGRAM CONTENT

THE A.D.A.P. CLIENT

Identifying the Person Who Is In Need of ADAP Services

Each person who is referred to an ADAP, shall (ADAP State Standards) be screened by the Division of Vocational Rehabilitation. Each referred person is entitled to an evaluation.

Whether or not the ADAP is a part of a sheltered workshop, the ADAP Evaluator should have at least some variation of the following options available after evaluation:

Competitive Employment
Extended Employment
Work Adjustment Training
Adult Developmental Activity Program - includes those programs previously termed: "adult activity," "work activity' or "day care".

Thus, before a person can be said to be in need of ADAP services the following must be considered:

Is this person a candidate for DVR Work Adjustment services?
If not, why not?
Is this person already capable of competitive employment?
If not, why not?
Is this person able to earn half minimum wage?
If not, why not?

It would be most unfortunate and highly undesirable to place a person capable of extended or competitive employment in an ADAP simply because other options are not available.

Describing the Person Who Is In Need of ADAP Services

An ADAP client can be described as an adult, who because of his/her handicap, exhibits severe deficits in at least one of four major areas of adult functioning:

1. Self-help skills such as eating, dressing, toileting and washing, etc.
2. Work skills such as production at a marketable task, persistency, ability to accept supervision, etc.
3. Social skills such as adequate behavior and peer relationships, ability to shop, purchase, or utilize community facilities, or
4. Communication skills such as the ability to understand and follow instructions.

This person would be in need of individualized programming in order to meet his/her specific needs. By definition, the Adult Developmental Activity Program is a service for substantially mentally and/or physically disabled persons which is designed to aid in their normalization and integration process by providing a program that is directed toward their individual needs.

ASSESSMENT

Client Assessment

Client assessment is an important area of service within an ADAP program. The purposes of client assessment are:

1. To determine whether the client should be in the ADAP program or should be referred to, or placed in other available programs

2. To determine what the client's present status is, relative to full social integration and integration intc the competitive world of work

3. To determine what his immediate training and rehabilitation needs are

4. To provide information to be utilized in the development of a habilitation or rehabilitation plan and more specifically in the development of prescriptive activities to meet this plan

5. Insofar as possible, to determine what the future needs of the client will be

Types of Assessment

There are essentially two types of evaluation which should be used with ADAP clients: one is of a more general nature, the other is focused on the needs of the ADAP client in particular. The more general form of assessment is termed "vocational evaluation," the more specific is termed "ADAP assessment".

Vocational Evaluation: This type of evaluation is usually provided through sheltered workshops or Vocational Rehabilitation facilities. It is comprehensive and can readily be used to determine the present status of the client and the types or type of program in which the client should be placed. It should include evaluation components of the following types:

1. Medical and Physical information
2. Physical Capacities
3. Psychological examination information and Psychiatric examination information if needed
4. General academic abilities
5. Social capabilities and capacity for self-care
6. Work and skill (i.e., self-help, communication, socialization, etc.) abilities
7. Mobility
8. Initial information of family involvement and family structure
9. General work habits
10. Dexterity (hand, eye, foot, etc.)
11. Employability
12. Motivation
13. Past history of services and attainment

Most often clients are sponsored in vocational evaluation by the North Carolina Division of Vocational Rehabilitation.

Standards for vocational evaluation are imposed on sheltered workshops and rehabilitation facilities in the Norms for Workshops Affiliated With and Utilized by North Carolina Division of Vocational Rehabilitation Services.

One of the most important tools to be used with mentally retarded persons in vocational evaluation is the MacDonald Vocational Capacity Scale. This is the only battery of evaluation activities that has been cross validated. It reflects abilities and characteristics of both the severely and mildly handicapped mentally retarded person. Its discriminatory abilities are good and also provides a profile from which general prescriptions can be developed. However, it relates almost exclusively to vocational capacities and not to general social integration of the client.

Directions for the development and administration of the MacDonald Vocational Capacity Scale can be obtained from the:

Developmental Disabilities Training Institute
University of North Carolina at Chapel Hill
3 Craige Trailer Park 194-A
Chapel Hill, N.C. 27514

Information concerning many vocational evaluation tools which can be used with mentally retarded persons can be obtained by requesting: Consultation Report on Vocational Evaluation from the Developmental Disabilities Training Institute at the above address.

ADAP Assessment: This form of assessment takes place within the ADAP program. It is more specific in many ways than general vocational evaluation and serves at least three major functions.

1. It provides information for specific prescriptions and planning which can be met within the ADAP program or those generic services available to it.

2. It provides a method of showing accountability; i.e., it establishes a client baseline from which client's growth can be readily assessed.

3. It allows the client to be assessed within the ADAP program; i.e., its structure, activities, relation to staff and peer clients, etc.

The best method for ADAP Assessment is the utilization of profiles and rating scales which allow the profiling of the client. Profiles allow for a quick and accurate view of the client's behaviors, training accomplishments and general growth. They indicate quickly those areas around which prescriptions should be developed and help to establish goal priorities.

The rating scale and/or profile should provide the following:

1. a detailed account of an adult's achievements and failings which will enable him to design a plan of action to tackle the weaknesses in social development,

2. periodic reassessments which will draw attention to lack of progress in specific areas, and also

3. information for evaluating an adult's level of functioning against the achievements of others of comparable mental ability, in order to establish "backward", "average" and "superior" social functioning.

The following are three scales from which profiles can be developed in the ADAP program.

1. The P-A-C and P-E-I: The Progress Assessment Chart (P-A-C), and the Progress Evaluation Index (P-E-I) have been designed to make these tasks possible. They help to give a fairly comprehensive picture of social functioning by assessing the presence or absence of selected social skills and social information, most of which can be taught to some extent to the mentally handicapped person.

   The task of sizing up each individual problem is considerably facilitated by using a diagram presentation which "charts" the situation rather than compressing information into a particular figure, be it a Test Quotient or Test Age. It is the intention of the P-A-C procedure to give a tentative picture of social functioning and dysfunctioning, rather than a quantitative test score. Unfortunately, a test score tends, only too easily, to become a permanent label used to explain (and excuse) inadequate functioning, when, in fact, the assessment should serve primarily as a base for organized attempts to improve the situation.

   The qualitative assessment of an individual adult's social functioning would, however, be incomplete and fail to give important information, if it were not supplemented by a quantitive evaluation of the general situation. In other words, while the P-A-C record indicates what the adult can or cannot do, this is not sufficient to judge whether he has done well or poorly, considering his age and limited intelligence.

   It would be rather pointless to compare the mentally handicapped adult's achievements with the standards obtained in the general population, because, generally speaking, social "backwardness" can be assumed without further detailed investigation. The term "backwardness" becomes meaningful, however, as a descriptive label applying to certain mentally handicapped people only when it refers to a standard set by the achievements of the mentally handicapped themselves.

   The P-E-I (Progress Evaluation Index), provides information relating to the "average achievement levels" in the various subsections of the P-A-C. The use of "average achievement levels" enables the assessor to decide with some objective justification whether an adult is backward, average or superior compared with adults with a similar mental handicap.

   The four P-A-C forms available at present, list a selection of skills which are related to social development, on the assumption that mastery of them will make it easier for the mentally handicapped person to adjust to the demands of the community.

   The P(Primary)-P-A-C refers to the early development of a very young normal child and is suitable for mentally handicapped children to approximately 7 years of age and sometimes older.

   The P-A-C 1 contains a selection of skills which are part of normal childhood development, but are particularly relevant to the social development of children of school age. This is the standard from suitable for mentally handicapped children aged 6 years to 16 years, but can also be used for older age groups.

The P-A-C 1A is an extension on the P-A-C 1 and contains additional social skills which are particularly relevant to the social education of the mentally retarded individual.

The P-A-C 2 has been designed for the adolescent and adult mentally retarded person and describes "parcels of behavior", (the combination of various skills of different types), which will help the mentally retarded person in his or her social adjustment.

Filling in the P-A-C form makes it possible to chart the weaknesses and strengths of a person's social functioning, to assess which areas require further teaching effort and to record by means of another assessment at a later date what progress in development has taken place. Hence the name: Progress Assessment Chart.

The most characteristic and probably most valuable part of the P-A-C procedure, is the circular diagram which permits a qualitative assessment of social behavior at a glance. The usual form of qualitative presentation, the so-called "psychogram" which compares the achievement levels in various aspects of functioning, is normally not able to provide a quick analysis of "failure and success" within each aspect which has been assessed. Yet, it is this very patchiness of functioning, where, for example, some difficult skills have been mastered, but some, apparently much "easier" skills have not been acquired, which is of primary interest to the instructor and evaluator.

The P-A-C measures in the following areas: Self Help, Communication, Socialization, and Occupation. (See Appendix for order forms for above materials.)

2. Adult Activity Rating Scale: This rating scale was developed by Ray Newnam, Jr. in 1971. Its original purpose is to discriminate a limited functioning, mentally retarded person's program needs. It is designed to discriminate programmatic needs.

This scale is to be used by instructors in Adult Activity Centers. It may also be used by teachers, rehabilitation personnel and work supervisors in institutions for the mentally retarded. The rater is requested to rate 27 types of behavior that might be observed in programs for mentally retarded adults. The scores of the ratings are totaled and this score is compared to established groupings. The groupings have brief descriptions of the type program a person falling in this grouping would be best suited.

Adult Activity Center Rating Form Groupings

Grouping 1. Clients with scores in this grouping should be considered for programs which provide skill training as the major programmatic activity.

Grouping 2. Clients with scores in this grouping are functioning at a relatively low level. Specialized programming and scheduling are indicated with skill training the major programmatic activity. Work should also be an important part of the program.

Grouping 3. Clients with scores in this area are good clients for Adult Developmental Activity Programs. Work and skill training are included in approximately equal measures.

Grouping 4. Clients with scores in this grouping are functioning at a relatively high level. The major activity for this group of individuals should be work.

There are five major areas of behavior measured in the Adult Activity Rating Form: Social Behavior, which includes behavior toward peers, social acceptance, psychosexual behavior and ability to participate in group activities; Personal Needs, which includes dress, hygiene, table manners, awareness of time, etc; Leisure Time Activities, includes self-confidence, happiness, and morals; Ability to participate in Center and Programs includes attentiveness, frustration tolerance, ability to follow directions, and so on.

This tool is now in the embryonic stage of development. Data collected upon it is now limited to 152 clients from four Adult Activity Programs. Adult Activity Instructors, Vocational Evaluators, and Work Coordinators were asked to group the clients in their program according to the four groupings for total scores. After the clients were placed in one of these groupings the Instructor rated the client using the Adult Activity Rating Form. The results of this are in Table I.

Table I

Correlations of Adult Activity Rating Form Scores With Instructor's Independent Grouping

N = 152 Mean = 68.45 S.D. = 19.20 Range = 37-99

Persons Grouping Subjects	Correlation Coefficients
Instructors	.983
Vocational Evaluators	.876
Work Coordinators	.880

It appears that this tool discriminates as well as the judgment of those individual professionals involved with the client in Adult Activity Programs. More data needs to be collected on clients in Work Activity Programs, Institutions and Adult Activity Centers. Correlations should be developed with I.Q. scores, Vineland scores, Vocational Capacity Scale Scores, and Cattne-Levine Social Competency Scale scores.

The advantages of using this scale along with the P-A-C or AAMD Adaptive Behavior Scale are the following:

1. It rates a person's behavior relative to his participation in the program.

2. It has cumulative scoring which discriminates program placement for severely handicapped adults.

3. It rates in degrees,social, personal, sexual, etc. behaviors rather than just whether he does them or not.

4. It is concerned with the effects of the client's behavior on other persons and the program in general.

Sample sets and materials for administration of this rating form can be purchased from the Developmental Disabilities Training Institute, University of North Carolina at Chapel Hill, #3 Craige Trailer Park 194-A, Chapel Hill, N. C. 27514.

There are two additional scales which can be used with ADAP clients; the Vineland Social Maturity Scale and the AAMD Adaptive Behavior Scales. (For information on the AAMD Scales, write to the AAMD, 5201 Connecticut Avenue, S.W., Washington, D. C. 20015.)

3. The Vineland Social Maturity Scale is a developmental schedule designed by Edgar A. Doll while at the Vineland School for the Mentally Retarded. It is mainly concerned with the individual's ability to assume responsibility for himself in an anticipated environment. It is now published by American Guidance Service, Inc., Publisher's Building, Circle Pines, Minnesota, 55014. Cost of Record Blank is $2.00 per package of 25. 1965 Edition of the Manual is $1.35. A Specimen Set, with the Manual is $1.50.

Although this rating scale has been standardized on persons with ages of 0 to 25, it appears to be most applicable to the young child and the mentally retarded person. It is designed as a structured interview with a rating scale for the items covered.

The interview should appear unstructured and spontaneous - one in which topics are brought up and the respondent is allowed to elaborate, expand and take new directions. Allow the respondent to go as far as he wishes about himself (or the client). If you are interviewing the client, it may be necessary to add more structure. But when the client begins talking about himself, let him talk. Don't interrupt because you feel you have to ask questions.

It will require 30-45 minutes to interview a respondent adequately.

According to the American Guidance Service Catalogue, this schedule is applicable for the following purposes:

1. A standard schedule of normal development.
2. A measure of individual differences, hence deviation.
3. A qualitative index of variation in abnormal cases.
4. A measure of improvement following therapy.
5. In clinical studies of retardation, deterioration, decline.
6. Assistance in child guidance and training, home or school.
7. Evaluating influence of environment and handicaps.

The composite raw scores of the Vineland are used as a component of the MacDonald Vocational Capacity Scale. It is excellent for determining the needs of mentally retarded clients in the area of personal and social adjustment. It should be kept as a running profile of the client's social skills and a measure of the success of Personal and Social Training. Persons responsible for Personal and Social Adjustment Training can use the results of it to develop individual curricula for mentally retarded clients.

Evaluator's using this schedule should become very familiar with the Vineland Manual and, essentially, memorize the items on the score sheet. Scoring is done on a +, - or ± basis, which represent attainment, nonattainment or transitional state of a skill. The directions of administration are adequately illustrated in the manual.

The best method of training for use of this tool is to have supervised administration. By this is meant the evaluator should be observed administering the Scale, by an individual knowledgeable about interviewing and the Vineland. After the Scale has been administered and scored the evaluator should discuss this with the observer. This is a more valuable method than observing oneself or video tape without the knowledgeable observer.

Reliability of the Scale is exceptionally high. Test-retest coefficient have a mean reliability of 0.97 based on an average of 1.35 years between tests. Anastasia says that the validity of this test was determined chiefly on the basis of age differentiation, comparison of normal and mentally retarded persons and correlation scores with informants who knew the person well. It has an average rank order correlation of 0.92. The use of different examiners or informants, who have had a chance to observe the client does not significantly effect the reliability.

The correlations between I.Q. tests and the Vineland are sufficiently low to indicate that different facets of behavior are being tapped by the two tools.

There is a significant correlation between the score on the Vineland and the complexity of a rated job in a sheltered workshop. This correlation is 0.64. This would indicate that the more capable a person is in caring for himself the more complex job he might be able to perform.

From the information obtained through research on the Vineland, it appears to be an adequate component of an assessment program.

1. It aids in determining the status of a client relative to competitive work.
2. It measures behaviors I.Q. tests do not remove.
3. It can be used with reliability at different chronological ages and with different examiners when administered to the same persons.
4. It can be used as a running profile of the client in training.
5. It is a very good device to determine training needs in personal adjustment areas.
6. It is very inexpensive and requires a short time to administer.

REFERENCES FOR CLIENT ASSESSMENT

1. Anastasia, Anne. Psychological Testing. New York: The MacMillan Company, 1954.

2. Dayan, Maurice. Validation of the Vocational Capacity Scale Utilizing Institutional Retardates. Investigation supported in part by Research Grant No. RD 1613-P from the Vocational Rehabilitation Administration, Department of Health, Education, and Welfare, Washington, D.C.; Pinecrest State School, Pineville, Louisiana, 1968.

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5. Ricker, Lawrence H.; Pinkard, Calvin M., Jr.; Gilmore, Alden S.; and Williams, Charles F. A Comparison of Three Approaches to Group Counseling Involving Motion Pictures with Mentally Retarded Young Adults. Vocational Rehabilitation Administration Project No. RD-989. MacDonald Training Center Foundation, Inc., Research and Education Division, Tampa, Florida, 1967.

PLANNING INDIVIDUAL PROGRAMS FOR EACH A.D.A.P. CLIENT

Why have individual planning?

1. Fact: People who have individual program plans progress better than those who do not.

2. Federal and State Standards mandate the development of individual programs and contracts between services and clients.

3. Individuals in programs have a right to have individualized program plans.

4. Staff frustration is decreased when clear individual objectives are developed for each client for whom they are responsible.

General Individual Planning

Almost every ADAP will have more than one service, or activity to offer. So, at some point, it must be decided which programs and activities are most appropriate for each person and why. Therefore, it's also necessary to state who is responsible for these referrals, contracts, plans, etc. and when and how it should be done. (Refer to page 171.)

This plan should reflect recommendations made from evaluation and should be prepared jointly by the Evaluator, A.D.A.P. Coordinator or Director and Client. Within 5 days of the Evaluation Staffing, this A.D.A.P. Plan should be entered into client's file with copies made available to other referring or supporting agencies as appropriate. This plan should also serve as the basis for annual re-evaluations.

Individual Goal Planning (IGP)

On the adjustment plan, several problems will probably be enumerated. Some problems might be handled by appropriate referrals (e.g. to Adult Basic Education, recreation, or other community services or agencies) and/or scheduling. Other problems (e.g. behavioral) will require a great deal of work on the part of the Client and Instructor. For this type of planning you will need more space for method and possibly more breakdown of objectives. For this purpose, the North Carolina Standards Committee of Mental Health has endorsed the Individual Goal Planning method by Scott and Houts. This is a humanistic approach which focuses on strengths and is easily taught and utilized by all levels of staff.

The Four Major Points of Goal Planning

Involve the person from the beginning.
1. Person's likes and wants should be part of each goal that is set.
2. Person should participate in setting the goals.
3. Always explain the goals to the person.
4. Treat that person the way you would like to be treated.

Start with what the person can do now.
1. Look at what person can do and not just at his problems.
2. Build new skills from what person can do.

Use small goals to reach larger goals.
1. Each goal should be mastered before going on to the next.
2. If you aren't making progress, it's probably because your goals aren't small enough.

State clearly who will do what and when.
1. Describe what person will do or how person will act when goal is achieved.
2. Identify staff responsibilities.
3. Choose a date when you think that goal should be achieved.
4. Spell out clearly what is to be done so that a new person could read the plan and know what to do.

In addition to the four major points of goal planning, Scott and Houts have developed strategies for dealing with problem behaviors, such as lengthening the time when a behavior is not a problem, pushing out behaviors with positive behaviors, and developing smaller goals. Scott and Houts also suggest techniques of getting assistance in goal planning.

(A goal planning form, several examples of goal plans, and where to get goal planning material is included in Appendix.)

THE USE OF WORK

If a person can put together a puzzle, pay attention in a group class, or make craft objects, he can perform real work. Real work provides dignity, remuneration and an opportunity to develop skills which can be used outside of the center. If pre-vocational training is to take place it should take place with real work as the major activity.

ADAP clients can be and are at least marginally productive and can gain personally in a significant manner from real work activities. Though many of these clients may never reach the level of productivity necessary to enter the competitive labor market; extensive training, education, behavior shaping and satisfaction may be accomplished through the performance or work tasks.

1. A Work-Oriented Program utilizes work as the major activity both for severely and mildly handicapped persons. Work is recognized as a therapeutic and training device. In our culture the activity of work has inherent in it a reinforcement system. It is desirable and rewarding to be involved in activities which are considered useful by other persons. Remuneration should be made on a piece rate basis which is commensurate with that in competitive employment. Work is an activity which in most cases possesses a relatively concrete structure which is particularly appreciated by mentally retarded persons. In accordance with these statements, the daily schedule is devised in such a manner (with work as the core activity) that training, counseling and education can take place within the program, (i.e., self-help skills, behavior control, working through feelings, development of work habits, developing acceptable social behaviors, etc.). Refer to PROGRAMMING for sample daily schedule. Also, the routines and rhythms of an ADAP program are devised in such a manner that they are similar to the routines and rhythms of other persons with chronological ages similar to the ones of the clients in the facility. It adheres to the principles of normalization. The work activity program should utilize these potent therapeutic and training techniques to develop skills and habits, to control behavior, and to deal with personal problems.

2. Types of Work

   Subcontract work or service work is made available to all clients in the ADAP Center. Some clients will benefit in a significant manner from real work; others will not benefit as greatly but in most cases it is a more effective and rewarding activity than putting together puzzles, crafts (in which the instructors do most of the work), television watching, etc. It is more dignified and extinguishes, to a great extent, the "eternal child" concept that is often attached to the more severely handicapped individual. There are several approaches to supplying 'work' in ADAP programs.

   a. Subcontract Work - Subcontract work is work that is contracted through a business or an industry that is involved in the manufacturing of a product(s). A subcontract is usually the production of one or more parts or the provision of a special service(s) which is required to manufacture, advertise or distribute this product. There are several advantages to the use of subcontract work in an ADAP Center.

1). It is real work that will go into the open market. This has appeal to workers and is more highly motivating than "make work" or crafts.

2). There is income for the ADAP center when using subcontract work if the bidding for the job is done right.

3). It causes the ADAP program to become more involved with the mainstream of business activities therefore promoting social integration and normalizing the perception of the ADAP center in the eyes of the community.

4). It is a dignified activity.
(Some suggested techniques for developing subcontracts are included in the Appendix).

b. Manufacture of Own Products (Prime Manufacturing)

Many ADAP Centers have tried making their own products. There are definite advantages to having such projects to work on when contract works falls off. The community relations value is helpful. The morale of the ADAP Center gets a boost when finished products are admired and sold. Encouraged by initial success and sale of a few hundred pieces and requests for more, the Center decides to embark on a full-scale program of prime manufacturing.

The outcome, in most cases, proves conclusively that the ADAP Center can make products in enormous volume but cannot sell them. The local market is quickly exhausted. The Center now has an inventory and a marketing problem.

The task of marketing a product in volume requires regional or nationwide distribution channels and the talents of a highly specialized marketing organization. For this reason the manufacturing project is seldom feasible for an ADAP Center except in those rare cases where a guaranteed market has been found.

c. Service Contracts

Most types of work are dignified and are usually performed within the center itself. However, not all work has to be performed in the center, nor does it have to have a manufacturing or production orientation. Service Contracts can be developed in which crews of workers with a supervisor can leave the center and perform service work for various businesses, industries, groups, clubs, individuals, governmental agencies, etc.

Some types of service contracts might be the following:

1). Janitorial services for motion picture theaters or other meeting places.
2). Maintenance crews for parks, recreational areas, highway medians, roadside parks, etc.
3). Cleaning services for restaurants, cafeterias, etc.
4). Janitorial services for Officer's Clubs, etc. on military basis.
5). Janitorial services for offices and governmental agencies.

(Before venturing into this type of work, get advice and consultation of Wage and Hour Division).

d. Crafts

The making of crafts is not usually considered a work activity. Crafts are more difficult to breakdown into simple operations than most manufacturing products. One usually overloads the market rapidly with craft items. It is difficult to make income off of crafts and actually they are usually costly to the Center. Further, instructors have a tendency to do most of the work on crafts while the clients look on.

Crafts should only be used when no other work is available. In certain rural areas where other forms of work are not available, crafts which are set up as a contract might be valuable, or such activities as horticultural units - greenhouses - can be profitable and valuable as work.

CAUTION:

> While some image juxtapositions have merely negative connotations (such as physically handicapped adults in a sheltered workshop making wheelchairs for other physically handicapped persons); others can carry strongly dehumanizing, pernicious, and even brutal messages, despite or perhaps because of their subtlety. Among these is the juxtaposition of a deviant group with an object, site, etc., that is associated with or symbolic of crime or death, disgust, worthlessness, garbage, cast-offs, discards, etc.: workshops for the handicapped specializing in garbage recycling; or in salvage of donated and discarded clothing, toys, and other articles (one workshop advertisement proclaimed 'recycle a bottle and recycle a person').
>
> Wolf Wolfensberger
> Program Analysis of Service Systems
> Field Manual

PROGRAMMING

Environment The environment of the ADAP should tend as much as possible towards adult environments within the community. This means that wherever possible that productivity and work is emphasized, and that even people who do not see work as meaningful at the present time be exposed to a work environment at least for portions of the day. For instance, a person who can only persist at a task for a few minutes may need to work for that period of time. This is not to say that programming and "rehabilitation" do not take place. They should take place and perhaps be the less "visible" aspects of the program. Involved in developing a work environment are such things as scheduling, using a time clock, reporting to a specific area, breaks, being paid, punching out, being addressed in an adult manner, and so on.

A sample schedule which utilizes work as the core activity for an ADAP might be:

ADULT ACTIVITY CENTER PROGRAM

A.M. -	Before Work Get Up - Prepare for Work Travel to Work Leave Parent at Home
8:00 -	Punch Clock In
8:00 - 8:30	Hygiene and Self-Help Skills
8:30 - 9:30	Work Activity
9:30 - 10:00	Break Recreation - and Snacks
10:00 - 12:00	Work Activity
12:00 - 1:30	Lunch Recreation Shopping Etc.
1:30 - 2:30	Work Activity Cleaning Grounds, Buildings, etc. Community Activities
2:30 - 3:00	Break
3:00 - 4:00	Work Activity Client-Staff Meetings Individual Goal Planning
4:00	Punch Out

It should be pointed out that everybody should not be on the same schedule throughout the day, but that at points during the day, that it is possible to emphasize certain aspects of the program, while individuals may be involved in continuation of other activities.

Work supervision is an important ingredient in the environment. Work supervisors and instructors in an ADAP Center should have attitudes and philosophies which are a balance between production and rehabilitation. This attitude is most often determined by the administration and their supervisors. Supervisors should be trained in the most modern instructional and behavior management techniques as well as listening and counseling skills. They should be sensitive enough to their clients and their own capacities to know when to refer a client to someone else for services they cannot afford the client.

In ADAP programs,staff members should become environmentally conscious, realizing that there are many aspects of the environment which may have an impact on individuals. For instance, having cartoons appropriate for children hung on the wall emphasizes that the clients are children instead of adults or, staff members wearing medical coats (lab jackets) or nursery school teaching smocks give similar negative impressions. Staff members should not just be conscious of the 'visual' environment, but be concerned about auditory aspects, as well as other aspects of the environment.

COMMUNITY INTEGRATION

A model A.D.A.P. might be located downtown or in an industrial area where community integration might be natural and easy. But if an A.D.A.P. does not have that type of setting, carefully planned programs within the A.D.A.P. can encourage community integration.

1. Where recreational and social-personal adjustment programs appear necessary, they should encourage integration through community involvement. For example, if a person lacks shopping skills, Don't set up a mock store - instead, schedule frequent shopping trips downtown or to a shopping center.

2. An A.D.A.P. should not plan to strive to provide recreation facilities in or near the center. Remember your image! Adults should be working, not playing.

3. Rather than providing special time for recreation at the A.D.A.P. the clients should be taught to recreate during normal recreating hours. At work, the lunch hour is an appropriate time for recreation. Otherwise, clients should be taught and encouraged to use community recreation facilities after work hours. The goal of an A.D.A.P. recreational program should be to equip the person, to the level and extent possible, with the skills and knowledge necessary to independently participate in these activities during their own leisure time.

4. Training of large groups at a time should be avoided - especially when this training takes place in the community. Training groups of no more than 2 or 3 handicapped adults are best. Groups of handicapped adults larger than this attract undue staring, etc. from others and prohibit community acceptance and the integration process.

5. Activities that might be considered for an A.D.A.P. Community Involvement Program: lunch at various restaurants, miniature golf, downtown movies, bowling, swimming, basketball, pinball - whatever is available in a community and the client is interested in doing. Remember: the goal is to help this person learn to do this activity on his/her own.

6. An important part of being able to participate in anything independently is being able to utilize public transportation. Thus, an A.D.A.P. should be simultaneously involved in training people to use local, public transportation.

   CAUTION: It's easy to physically integrate but not socially integrate- we need to train handicapped persons not to commute and recreate in groups but to set up one-to-one as well as group peer relationships with non-handicapped age peers.

7. A.D.A.P. clients should be trained and encouraged to use public transportation facilities rather than segregated vans.

TASK ANALYSIS AND PRECISION INSTRUCTION IN AN ADAP

> No longer can an instructor be only a combination of philosopher and social worker. The role of instructor calls for a highly trained technician who is responsible for a unique contribution to the person's welfare - that of teaching him essential concepts and skills.
>
> It is in the task analysis process that true logic, skill, knowledge, ingenuity, creativity and excitement of instructing the handicapped worker-client expresses itself.
>
> Englemann, 1969

Task analysis is the technical term for breaking down a task into teachable components or steps. There are many different methods of task analysis (T.A.) not to even mention the different types of T.A. But the two types of T.A. that are of interest and importance to ADAP staff are content and process Task Analysis.

Content Task Analysis

A content task analysis simply outlines what the client will need to do in order to complete a task. The content T.A. can be very simple or very complex. Just remember, the steps must be based on the competencies of the learner. Therefore, it is necessary to have a "composite learner" in mind. The "composite learner" is the preconceived notion of the person you will teach.

Task analysis allows for a more positive approach. For example, you might think that a certain person has no hope of ever going downtown to a restaurant independently. But, after filling out a Community Lunch T.A. you may realize that he already possesses one-third of the skills required! Another advantage of having done a content task analysis is that it allows for a standard cycle. This means that the task will be done exactly the same way each time. Thus, the learning process will be simplified and quality control will be built-in.

In trying to identify where training emphasis will have to be, we must look at not only the motor or social requirements of the jobs but also the judgment demands of a task. Judgment requires a range of correctness and research tells us very little about how to teach judgment (e.g. how tight is tight) skills. On the other hand, research gives us a lot of techniques about teaching information and discrimination skills. The Attention Theory of Zeaman and House is a good example of research in teaching discrimination skills.

Attention Theory of Zeaman and House

> A handicapped worker may have to be taught to attend the relevant dimensions of a task. The manipulation of variables can be used to aid in this focus.
>
> Learning consists of an initial period of responding at chance followed by a sudden onset of learning, or a point where the person makes an insightful solution to the problem.

The difference between normal and retarded persons lies not in the rate at which performance increases but rather in the length of time it takes the retarded person to reach the point where he begins to learn.

The use of order and number of variables is crucial in determining sequential development of ability to focus on the relevant task.

The instructor's responsibility is to manipulate the variables of the stimuli to evoke the desired response.

Process Task Analysis

Process T.A. is simply designing a method for teaching the content. In essence, the content T.A. outlines what the worker will do and the process T.A. outlines what the instructor will do. But remember, if you want quality control - do not let the client produce until you have taught him the process. Also, you must establish criterion for correctness so that you will be objective in your opinion of when the task is learned.

"Error Free Learning" is an examples of a popular instruction technique. Basic principles underlying the method are: isolation of concept, movement from the concrete to the abstract; repetition; short learning sessions; sequencing; positive reinforcement and; client success. A process task analysis would outline four major steps to the "Error Free Learning" instruction technique.

1. Modeling

   A mentally retarded person may not understand by simply being told. The instructor demonstrates what he wants the client to do. The instructor is a model and demonstrates exactly what the client is to do.

2. Prompting

   Instructor gives physical assistance in discriminating the appropriate response. The Instructor physically moves the client's hands and fingers in order to supply the client with the required response.

3. Cueing

   Instructor gives cues or hints to the client as to the correct response. Some cues are: size, shape, position, number, pointing with finger. For example, after client appears to be "getting the hang of it", the instructor fades physical prompting, but gives cues as necessary to enable the client to do the task right. The objective is that the client will learn to do the appropriate thing at the appropriate time. Thus, all instructions and cues should be faded out when possible. At first, direct commands may be necessary. Later instructor waits a few seconds before saying anything - client given chance to respond to "what's next", etc.

4. Reinforcing

Instructor watches for client doing the correct thing and shows approval. Positive reinforcement is that reward which follows a behavior and makes that behavior more likely to happen again. Two types of positive reinforcement that all instructors can use:

Verbal	Non-Verbal
"Good Work"	Smile
"Just Right"	Nodding of Head

But remember, what may be reinforcing to one person may not be to another. So positive reinforcement should be very individualized.

BEHAVIOR MODIFICATION

Behavior modification is a very powerful tool when used appropriately and with discretion. It can aid significantly in the development of new skills, increased production, control of unacceptable behaviors, etc. Because it is effective, it is a popular technique. One of the concerns which is often expressed about behavior modification is that people who use behavior modification sometimes become so concerned with the effectiveness of what they are doing, they forget about the person they are using the technique with.

Definition of Behavior Modification:

Behavior Modification is the systematic and explicit use of principles of learning to change or create new behaviors. Other terms that refer to the same approach to behavior are (1) behavior therapy (2) contingency contracting (3) precision teaching and (4) reinforcement therapy.

Focus:

1. It is concerned with behavior: what the adult does - i.e., actions, not words; e.g., walk, talk, laugh, smile, spell, hit, steal, play, complete work, etc.

2. The behavior must be overt and observable - what is the person actually doing rather than what you assume that he is doing. For example, to say a client completes 25% of his work and takes 30 minutes to get started working is observed behavior.

3. The focus is on current behavior - what is happening here and now.

Assumption:

Behavior, whether appropriate or inappropriate, is learned in the exact same way. The behavior is not seen as a symptom of some underlying pathology or abnormal process. "Hitting," "not doing homework" is learned in the same way as "studying," "taking turns," etc.

Treatment:

The focus of treatment is on learning: re-learning or learning an entirely new behavior.

All staff of an ADAP Center should generally be knowledgeable in the field of behavior modification specifically in use of reinforcements principles and extinction.

In the Appendix are two methods through which behavior modification techniques can be introduced into an ADAP Center. In the "Metro Industrial Services Token Economy" description, a program using behavior modification techniques in a total Work Activity Center is discussed. The Appendix, "Behavior Modification Program" outlines a behavior modification unit concept, which works with 6-8 clients in an isolated area within the program.

COUNSELING

There are times when instructional and behavior modification techniques will not meet the needs of clients in an ADAP Center; e.g., when the problems of the client mainly involve feelings. Symptoms for the need of counseling might be spontaneous, unexpected behaviors which have not regularly occurred in the past, family problems, loss of loved ones or objects, psychosexual problems, depression, withdrawal, acting out behaviors, unusual anger or aggressive acts, disorientation, mood swings, etc.

Counseling is defined as a relationship between two or more persons in which one of the participants is considered a helping agent and the others are considered persons in need of help. The help received by those persons in need is through the relationship and the techniques used by the helping agent in this relationship.

A prime requirement of the helping agent is that he be able to develop a helping relationship and promote communication with the person in need.

The major skill involved in counseling is listening without projection or judgment until all of the information about feelings and the underlying situation is reported. All ADAP staff should have listening skills. But it is not possible for all ADAP staff to have the counseling or psychotherapeutic skills to solve all of the problems that clients might display. Therefore, it is necessary that persons with good counseling skills be available as support to the ADAP staff.

This might be accomplished in the following manner:

1. A staff member with good counseling skills designated as a counselor for the ADAP program.

2. The use of counselors and therapists in a mental health center as referral recipients. Often the M.R. coordinator will possess these skills.

3. An arrangement with a hospital or clinic for counseling and psychotherapeutic services, if the professionals in these facilities are interested in working with mentally retarded persons.

4. Use of private psychologists, psychiatrists, psychiatric social workers who are interested in working with mentally retarded persons.

5. An arrangement with well-trained Vocational Rehabilitation Counselors who have as a major part of their responsibility working with developmentally disabled persons.

6. An arrangement with school counselors and social workers who have a special interest in working with mentally retarded persons.

7. An arrangement with Department of Social Services social workers who have skill in working with mentally retarded persons.

ADAP staff in general should have training in listening and problem solving skills. This can be obtained through special workshops, consultants and college courses. There is packaged training in Parent Effectiveness Training and Human Effectiveness Training which costs about $75.00 per person. This training aids in the development of those skills mentioned above and is oriented toward the layman and general workers in human service programs. There usually are local people who will teach the courses in P.E.T. or H.E.T. It would be good if whole staffs could take this type of training together.

STAFF DEVELOPMENT

Most people who work as staff members in ADAP programs were not trained in working with handicapped people, and, as a result, the training of these people is accomplished after they begin working. Such training can be accomplished in many ways, some of it in-house, some at local colleges and technical institutes, and some of it of a residential nature where staff members leave to interact with other persons in similar positions and similar programs.

Some general goals of training staff members and other interested individual are:

1. General knowledge of the field.
2. Positive and constructive attitudes toward the handicapped person.
3. Understanding and internalization of modern human management ideologies. Principles of Normalization.
4. Local, State and National service goals.
5. Understanding the operations of one's own service system and generic services used.
6. Flexibility in thinking and approach, receptivity to new ideas, lowered defensives about being evaluated and criticized.
7. Development of new and powerful skills.

Some of the techniques of delivering training to staff members are:

1. Formal, regularly - scheduled training sequences - repeated sessions.
2. Pin-pinted, one - shot, single topic training workshops of various durations.

   Management By Objectives (MBO)
   Goal Planning
   Sex Education

3. Lectures or interpreted films.
4. Tutoring - type relationships for leaders.
5. Correspondence courses.
6. Temporary exchange work assignments.
7. Practicum, apprenticeship, on - the - job.
8. Interpreted tours of other agencies.
9. Exchange visits among agency personnel.

10. Educational leaves of absence.

11. Time off with pay for accredited degree courses.

12. Financial support payments.

    Transportation
    Tuition
    Books, etc.

13. Attendance at outside sources or workshops.

14. Participation in study tours.

15. Conventions and conferences.

16. Use of outside experts (lecturers).

17. In - house courses through community colleges.

PROGRAM EVALUATION

Optimally, assessment should address itself to client performance, staff performance, and program effectiveness. Also assessed should be the degree to which the protection of client's rights and welfare is monitored.

Assessment can be internal and external. By far the most common types of assessment tend to be internal. Though desirable, such assessments are often fragmented, biased, and conflicted. Provisions for internal evaluation can come from such measures as suggestion boxes, client turnover or termination rates, and cost-yield analysis. External assessment is more highly valued than internal, particularly in regard to program performance. External measures might include PASS; accreditation assessments; assessment by outside expert consultants; feedback from client consumers by means of questionnaires and surveys; and the monitoring activities of citizen and consumer organizations, and possibly of other public groups such as public officials, legislators, etc.

The larger and more varied the measures for any type of assessment, the more revealing and effective is the assessment apt to be.

Client growth and development may be evaluated, internally or externally, by means of administration (preferably before and after) of standardized and reliable instruments assessing change (such as intelligence tests, information and achievement tests, aptitude tests, performance tests, assessments of behavior and conduct, surveys of environmental and status change, inventories, rating scales and observation techniques employing objective checklists and schedules); by continual charting of behavioral change (as used in precision teaching); and possibly by using means of recording change by mechanical instruments, such as tape recorders and optical devices.

Staff may be evaluated by regular, periodic review, hopefully based upon objective criteria and rating scales, external examiners and evaluators, periodic comparison of staff function with job descriptions, feedback on staff from clients, etc.

Finally, whatever extent and combination of approaches is used, they should be administratively feasible, realistic, and reasonably economical and efficient. It may be salutary to recall that the frontier trend now is to reserve 10-15% of an operating budget for evaluation and change.

APPENDIX ITEMS

(In order as subjects appear in standards)

(SAMPLE CONSTITUTION AND BY-LAWS FOR ADAP ADVISORY BOARD)

Constitution and By-Laws

for the

_____Advisory Board

ARTICLE I

Name

The name of this organization shall be the _____.

ARTICLE II

Purpose

The purpose of this organization shall be to provide advice and consultation to the Director of the _____, a program of the _____, and to his staff.

ARTICLE III

Responsibilities of the Advisory Board

Section 1. The _____Advisory Board has no power or authority in the operation of the _____. Such power and authority is retained by the _____Area.

Section 2. The _____has the responsibility to provide, at the request of the Director and staff of the _____, advice and support in matters brought to the advisory board by the _____, or upon which the Director accepts consultation.

ARTICLE IV

Membership

Section 1. Any person may become a member of the Advisory Board at the nomination of the Director and the election of the Advisory Board (with a quorum present and voting).

Section 2. All members shall be entitled to one vote in person at any membership meeting of the Advisory Board.

Section 3. Termination in membership will automatically result from missing three consecutive quarterly meetings of the Board. Reinstatement may occur in the same manner as original membership.

ARTICLE V

Meetings of Membership

Section 1. Quarterly meeting. The _____ shall meet four (4) times per year, with exact dates for such meetings to be determined by the membership present and voting at each prior meeting.

Section 2. Other meetings may be held at other times during the year at the request of the Director, and after consultation with the Chairman of the Advisory Board. Such meetings shall be termed "Unscheduled". Notification of all members shall be accomplished by the Director two weeks prior to the meeting date.

Section 3. The membership meetings are open to anyone eligible for membership, or anyone invited to attend by the Director, although only members may vote or hold office.

Section 4. Minutes of all meetings shall be kept.

ARTICLE VI

Election of Officers

Section 1. A Nominating Committee, composed of a maximum of five (5) members, one of whom holds office, shall be appointed by the Advisory Board at the meeting held nearest to October 1st. The Director shall be a consultant to the committee.

Section 2. The Nominating Committee shall nominate, from the membership of the Advisory Board,a candidate for each office, and secure the consent of the nominee to serve. The names of those nominated shall be reported by the committee at the next meeting, with additional nominations accepted from the floor, provided the consent of the nominee has been secured.

Section 3. The officers of this organization shall be Chairman, Vice-Chairman, and Secretary. (There shall be no Treasurer since the function of a Treasurer are assumed under the _____ Area Mental Health Center).

Section 4. Officers shall be elected for a period of two (2) years, or until their successors are elected. They shall take office at the close of the meeting at which they were elected.

Articles of Incorporation and Constitution and By-Laws (Private, non-profit)

The Adult Developmental Activity Program operated by a private, non-profit corporation shall be legally constituted under the provisions of the North Carolina Non-Profit Corporation Act. Articles of Incorporation also known as charter, shall be filed with the:

Secretary of State
Corporate Division
Raleigh, North Carolina 27611

Constitution and By-Laws shall be developed by describing the purpose for which the corporation is organized. It is suggested that programs contact a local attorney to assist them in filing their Articles of Incorporation. In order to be recognized by IRS as a non-profit organization "Application for Exempt Organization" (form #1023) must be filed with IRS. This form may be obtained at your local IRS office.

(SAMPLE)

ARTICLES OF INCORPORATION OF

_____

(ADAP) (Private Non-Profit)

We, the undersigned natural persons of the age of twenty-one years or more, do make and acknowledge these Articles of Incorporation for the purpose of forming a non-profit corporation under and by virtue of the laws of the State of North Carolina.

I

The Name of the corporation is _____

II

The period of duration of the corporation is unlimited.

III

The purposes for which the corporation is organized are:

A. To provide personal services and facilities for evaluation and training of handicapped persons to enable them to function as independently as possible in society.

B. To provide activities for those persons so severely disabled that they are marginally productive or non-productive at work tasks:

1. to provide an opportunity for personal enrichment
2. to provide an opportunity for leisure time activities
3. to enhance, to the greatest extent possible, personal and social adjustment
4. to provide an opportunity to develop maximum work habit
5. utilization of work and work environment to enable handicapped persons to develop acceptable work patterns.

6. to provide an opportunity for movement from this training program to other programs with goals oriented more towards competitive work placement.

IV

The corporation shall have the power to make donations for public welfare or for religious, charitable, scientific or educational purposes, and in time of war to make donations in aid of war activities. The corporation shall have the power to lend money to its employees other than its officers and directors and otherwise to assist its employees, officers and directors.

V

The corporation shall have members which may be divided into such classes as shall be provided in the by-laws. All members shall be accepted, appointed, elected or designated in the manner provided in the by-laws.

VI

The directors of the corporation shall be elected by the members in the manner provided in the by-laws.

VII

No part of the net earnings of the corporation shall inure to the benefit of any officer, director or member of the corporation; and upon dissolution of the corporation the assets thereof shall, after all of its liabilities and obligations have been discharged or adequate provision made therefore, be distributed to any association or associations organized for purposes similar to those set forth in Article III hereinabove, all as more particularly provided in the by-laws of the corporation.

VIII

The address of the initial registered office of the corporation in the State of North Carolina is _____.

IX

The number of directors constituting the initial board of directors shall be five (5), and the names and addresses of the persons who are to serve as the initial directors are:

Name	Address

The names and addresses of the incorporators are:

Name	Address

IN WITNESS WHEREOF, we have hereunto set our hands and seals, this _____ day of _____.

I, _____, Notary Public, do hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing Articles of Incorporation.

Witness my hand and Notarial Seal, this _____ day of _____.

_____
Notary Public

My Commission Expires:

_____

SAMPLE CONSTITUTION AND BY-LAWS FOR AN ADULT DEVELOPMENTAL ACTIVITY PROGRAM FOR HANDICAPPED ADULTS (Private Non-Profit)

This constitution is not offered as a model to be used without revision, but does suggest important items of information to be considered.

CONSTITUTION AND BY-LAWS OF

_____
(Name of ADAP)

Adopted _____
(date)

Article I

Name

The name of this organization shall be _____

and it shall be located in _____ (city), _____ (county), _____ (state).

Article II

Purpose

This organization operates for the purpose of providing personnel, services, for evaluation and training of handicapped persons and provide each person an opportunity to develop to his optional level of independence in as normalized environment as possible.

Article III

Management

Section 1 MANAGEMENT. The management and control of the affairs of this workshop shall be vested in and exercised by a Board of Directors consisting of not more than twenty-four nor less than fifteen persons, who shall be elected, upon the organization of the corporation, by the incorporators thereof.

Section 2 ELECTION OF BOARD. The first Board of Directors shall serve until the first annual meeting of the corporation and until their respective successors are elected and qualified. At the first annual meeting, the Board shall be divided into three groups, as nearly divisible by three as possible, one group with a term of one year, the second group with a term expiring in two years, and the third group with a term expiring in three years; at all annual elections thereafter, the directors for each group shall be elected by the Board of Directors for a term of three years to succeed the directors whose terms then

expire. No director shall be eligible for re-election except

a. Where at least a year has elapsed since termination of his previous term;

b. Where the director has been elected to fill an unexpired term;

c. Where at any annual meeting it shall be determined that in special cases a director shall be eligible to succeed himself.

Section 3 BOARD VACANCY. A vacancy on the Board of Directors shall be filled by election by the majority of the remaining directors present at any annual meeting of the Board, or at any regular or special meeting, provided that notice of the proposed election of a director to fill such vacancy is given in the notice of such regular or special meeting. Each person so appointed to fill a vacancy shall serve the unexpired term.

Section 4 BOARD MEETINGS. The Board of Directors shall meet approximately once a month at a time and place designated by the President. Special meeting of the Board of Directors shall be called upon the written request of six (6) members of the Board, or may be called at the discretion of the President. Notice of the Annual Meeting shall be published at least ten (10) days prior thereto. Written notice of any regular meeting of the Board of Directors shall be sent to each member of the Board at least five (5) days prior thereto, and written notice of any special meetings shall be sent to each member of the Board at least five (5) days prior thereto.

Section 5 ANNUAL MEETING. The annual meeting of the Board of Directors shall be held during the month of _____ of each year at a time and place to be designated by the President.

Section 6 NOTICES. The Secretary of the Board shall prepare and cause to be sent or published all notices herein mentioned.

Section 7 VOTING. All matters considered at a meeting shall be decided by a majority vote of those present, and all votes shall be by voice, except that upon request of anyone present a roll call vote shall be taken. The President shall not vote except in case of tie, in which event he shall cast the deciding vote.

Article IV

Officers

Section 1 OFFICERS. The officers of this organization shall be a President, a Vice-President, Secretary, Treasurer and such other officers as the Board of Directors may from time to time determine.

Section 2 ELECTION OF OFFICERS. A majority of the whole Board of Directors, at each annual meeting, shall choose a President, a Vice-President, Secretary and Treasurer. The officers of the organization shall hold office for a term of one year and until their successors are chosen and qualify in their stead.

Section 3 DUTIES. The officers of the organization shall perform such duties as may be required of them by the Board of Directors.

Article V

Standing Committees

Except as hereinafter otherwise provided, the following Standing Committees, which shall from time to time make written or oral reports of their activities, shall be appointed for a term of one (1) year by the President as soon as feasible after his election and his induction, and their personnel shall be reported to the Board of Directors at or before the next ensuing meeting.

EXECUTIVE COMMITTEE: The elected officers, together with the Chairman of the other Standing Committees, shall constitute the Executive Committee. The Executive Committee shall be fully empowered to exercise all the functions of the Board of Directors between meetings, subject, however, to the approval of the Board of Directors, but provided that its action in administrative matters shall not be subject to such approval. The majority of the Executive Committee shall constitute a quorum.

PUBLIC RELATIONS COMMITTEE: The function of the Committee shall be to plan and carry out an appropriate program of publicity designed to inform and interpret the activities of the workshop.

TRAINING-PLACEMENT COMMITTEE: The function of the Committee shall be to plan and carry out an appropriate program designed to implement the training and placement activities of the workshop.

FINANCE COMMITTEE: The function of the Committee shall be to plan and carry out an appropriate program to assure sound fiscal operation.

Other committees, such as building and grounds, subcontract, and nominating, may be required as standing or interim committees.

Article VI

Funds and Securities

Section 1 The Board of Directors may authorize any officer or officers, or any employee in conjunction with one or more officers, in the name of and on behalf of the corporation to enter into any contract or execute and deliver any instrument or to sign checks, drafts or other orders for payment of money or notes or other evidence of indebtedness, and such authority may be general or it may be confined to specific instances; and unless so authorized by the Board of Directors, no officer shall have the power or authority to bind the corporation by any contract or engagement, to pledge its credit, or to render it financially liable for any purpose or in any amount.

Section 2 All funds of the workshop not otherwise employed shall be deposited from time to time to the credit of the workshop in such banks, trust companies or other depositories as the Board of Directors may select or as may be selected by any office or officers of the workshop to whom such power may from time to time be delegated by the Board of Directors; and for the purpose of such deposit, the officer and/or officers to whom such power may be delegated by the Board of

Directors, may endorse, sign and deliver checks, drafts, and other orders for the payment of money to the order of the corporation.

Article VII

The fiscal year shall begin on the first day of _____ in each year.

Article VIII

Amendments

This Constitution and By-Laws may be altered or amended by a two-thirds (2/3) vote of the Directors present at any regular meeting of the Board, notice of which proposed amendment or amendments has been given to the Board of Directors along with notice of the meeting itself.

Material developed by the Rehabilitation Facilities Staff, Office of Vocational Rehabilitation, Department of Health, Education, and Welfare, Washington 25, D. C., 1962. Adapted 1963 for use in Region III by regional office staff.

VRA/DHEW
January 1964

DYNAMICS AND FUNCTIONS OF A BOARD OF DIRECTORS

The Board

An organized group whose responsibility is to direct, guide and support the development and continued operations of an Adult Developmental Activity Program. Generally it is not the responsibility of board members to be involved directly with the operation of the program as counselor or supervisor. Initially, however, when programs are begun, it may be necessary for members of the board to volunteer their services for basic (concrete) support. As a program matures, the board and/or individual members should withdraw from such involvement, turning it over to professional hired staff or a structured volunteer service in which board members are not involved. Employees of board and volunteers should never be members of the board. The mature board is one which assumes guidance, support and direction for the program, not one of direct participation. These roles in themselves require a tremendous amount of energy, knowledge and expertise.

Membership

Widely held beliefs are that the optimal range for board size is no smaller than five and no more than fifteen. The membership should be composed of consumers and professionals who are dynamic; sensitive to the needs of human beings; flexible to the degree that they are not tied to outdated philosophies and treatment modes of handicapped individuals; are secure to the extent that they cannot be easily swayed or dominated by other individuals; and are not afraid to express their beliefs, ideas and general thoughts about the development and operations of residential programs.

1. Professional members - may be citizens who hold positions in various agencies and programs which provide human services. Persons from the following agencies may hold priority: Social Services, Mental Health, Vocational Rehabilitation, Adult Rehabilitative Services, Community College - Technical Institutes, Public Health Departments, etc.

2. Consumers - include all persons who now need services, may need them in the future and general citizenry of the community. There should be balance and discretion in appointing these members. There should probably be no more than two parents or family members of handicapped individuals appointed to the board. Consideration should be given to the appointment of an individual who is a resident or could be a resident of the program. There should be appointed citizens who have no direct connection to the program through family or occupation. This latter group may be the most important in that they have no direct ego investment and can be objective with clearer perception of the issues and directions in which the program should develop.

Advisory Structures

1. An advisory board may be developed which includes experts and professionals. An advisory board is just exactly what its name implies, that of offering advice and consultation. Members of this board should not be involved or present when policy is set or when the board of directors are dealing with administrative issues. Information from the advisory board should be presented to the board of directors, but it is the board of directors who decide the viability and usefulness of the advice relative to the functioning and development of the program. Employees may be included on this board.

2. Individual consultants should be utilized when needed. Funds should be included in the budget for consultants. The advise from the advisory board is used.

Grievance Structures

A grievance structure should be developed early in the history of the board's functioning. This structure would include policy and procedures for various persons (clients, employees, parents and family of clients, advocates, neighbors and the general citizenry) to present their grievances (should there be any) to the board.

Citizen Advocates

The Board of Directors should be aware of and support advocates for the clients that are being served. If advocate groups are not in existence, the board should help in support and development of such gruops. Advocates can keep the board sensitized and aware of the programs purpose and the manner in which services are being delivered, the rights of the clients and the general treatment of the clients.

Advocates should be autonomous; i.e., individuals not involved as employees, board members or employees of the various human service programs involved or related to the residential program.

Board Responsibilities

1. Guidance - Support - Protection

   a. Guidance is the giving of general direction to the program by providing the director or designated employees with information, policies and wishes of the board which will allow the program to follow the course decided upon by the board.

   b. Support for the program is provided by listening and being sensitive to the program and the issues and problems entailed in attempting to follow the course decided upon and/or conflicts which may occur between the program, clients, general consumers and other agencies. Directions may be given to deal with the problems and conflicts and/or the board may take action itself.

c. Protection is provided the program and its employees by dealing directly with persons, programs, government, etc., which may attempt to reach into the program to make changes, manipulate clients and employees and/or bring undue pressure upon the clients or employees because of some specific bias.

2. Coordination of Financial Security

The board is responsible for the development of funds. It is also responsible for the development and acceptance of a yearly budget and the responsible expenditures of monies.

a. The board should be aware of the sources of money from which the program can obtain funds. This would include grants from private and governmental resources; local, state and federal tax funds; and fees paid by consumers.

b. A realistic and economical budget should be developed each year.

c. The board is responsible for the expenditure of all funds. This, however, does not mean that the treasurer should have concrete control over all of the monies spent, but should have a system for accurate accounting. Due to programmatic factors in most residential programs freedom of places to purchase food, various services, etc., should be left up to the discretion of the home managers.

3. Development of a Basic Philosophy

The board should develop or approve a basic philosophy for the program; why a program like this; what is it supposed to accomplish; who it is supposed to serve; what techniques and types of facilities will be used to accomplish the goals and a general idealogy of how humans should be treated when being served by the program.

4. Policies and Procedures

The board should develop or approve policies which have to do with clients of the program (i.e., their rights, incidents that might occur, the selection of the clients, what to do in emergencies, etc.) and employees (i.e., their rights, their responsibilities. indiscretion and inappropriate behavior while on or away from the job, hours of work, pay, relationship to the board and other agencies, vacation time, etc.). Other policies having to do with various agencies (i.e., Social Services, institutions, Mental Health Centers, etc.) should be developed and/or approved by the board.

Procedures (the techniques, activities and directions) used to carry out the policies and wishes of the board should be developed and/or approved by the board. There are many procedures which are standardized both in business and health services which need only to be selected and approved by the board. Other procedures are stated in standards and must be utilized to meet these standards. In this case, the board must be aware of them. In many instances, the board may have to develop its own procedures relative to its programs.

All procedures which have to do with the direct programmatic areas should be approved by the board (e.g., use of behavior modification, transporting clients from one place to another, use of specialized training techniques, etc.). The board needs to know what is going on.

5. Planning

Planning for future development and change is a very important responsibility of the board. Projections should be made for the future and the methods to go about obtaining these projects should be identified. The use of Management by Objectives is an excellent instrument to use in planning.

6. Development and Education of Board Members

Since many persons asked to participate as board members are from the general citizenry, they often have little knowledge of the handicapping conditions of developmentally disabled persons or the general nature of community day activity programs for this group of people, it is necessary that they be trained and informed about the clients who are being served and the most up-to-date philosophies and program structures for Adult Developmental Activity Programs. There is also a need for general training on how boards function and how they as members should participate.

Monies should be budgeted for board training and development.

7. Program Evaluation

Program evaluation is a responsibility of the board (i.e., Is the program accomplishing what it is supposed to accomplish? Is it accomplishing this while maintaining the dignity and rights of the clients? Is there cost effectiveness? etc.) Evaluation may be both internal and external.

a. Internal evaluation may include client assessment, staff evaluation, program evaluation through tools and instruments that are utilized within the program itself. In addition, the board may appoint a committee which with specifice criteria investigate the functioning and operations of the program on a periodic basis.

b. External evaluation may be accomplished by the hiring of consultants (technical assistance) and use of governmental agencies, advocacy groups, etc. Information and data collected in this manner should be reported to the board. Recommendations should be made with all evaluation reports and action taken upon these recommendations if viable.

8. Self-Examination of the Board

A board should continually examine itself relative to its effectiveness and functional abilities. When it begins to debilitate the program, creating more problems in program execution than it enhances, then it should reorganize itself, re-define its role and establish useful activities. Just because a board exists does not necessarily mean it is doing good. It can be as destructive and impotent as it can be helpful and strong.

Internal Function - A cooperative Unit

1. Adjustive Capacities of a Board

   a. A board may be defined as two or more persons who have psychological and business relationships with each other. That is, the members exist as a group in a psychological field of each other which produces a dynamic relationship to each other. The psychological elements which influence this dynamic situation may be: personality, biases, socio-economic levels, professions, education, race, sex prejudices, etc. These factors have a lot to do with how the board functions. Not only does this psychological relationship exist, but also a business one and this has to do with the direction of a community program.

   b. Within this dynamic relationship is a tremendous amount of energy, knowledge and concern for the guidance of a program, development of new programs, incorporation of new techniques and methods, understanding and solution of problems.

   c. Board members demonstrate during specific times some degree of instability or disequilibrium as a result of the forces within the group. The board then is a dynamic system of forces. Changes in any part of the board produce changes in the board as a whole.

   d. Board member behavior which serves to reduce the disequilibrium produced by changes in the inner forces of the board may be described as adjustive behavior. The degree to which the board's behavior is adjustive will be a function of the appropriateness of the method employed by the group as they relate to the nature of the internal imbalance.

   e. A board's adjustive behavior will be most appropriate when the group utilizes the maximum resource of its total membership. This means maximum participation of all board members, each making the most effective contribution.

   f. A board has within itself the adjustive capacities necessary to acquire a greater degree of internal harmony and productivity and to achieve a more effective adjustment to its environment. Provided certain conditions are met, the group will move in the direction of greater utilization of these capacities.

2. Leadership

   a. The most effective chairman is one who can create the conditions by which he will actually loose the leadership to the board. (This proposition actually requires a much stronger, more sensitive and more knowledgeable individual than does authoritative leadership. It requires a leader that is secure, knows his own skills, respects himself, can respect and trust other persons, is sensitive to and knowledgeable of the board's skills and capacities. He is confident that the board can

solve its immediate problems if given the chance, environment, and necessary support. He is confident the board will take action but he accelerates the process whereby its actions will be self-initiated. He is interested in the board as a developing social organism. He sees his functions as that of helping the board work out its own adjustment, and by so doing, become more self-responsible than before. And because he holds such values, the chairman is more comfortable adopting a role that seems to him consistent with these values. The chairman believes in the worth of the board members and respects them as individuals different from himself. He believes the board as a whole can provide for itself better than any single member of the board.)

b. The Chairman must ask himself certain questions.

(1) Do I trust the capacities of the board and of the individuals on the board to meet the problems with which we are faced, or do I basically only trust myself?

(2) Do I free the board for creative discussion by being willing to understand, accept and respect all attitudes or do I find myself trying subtly to manipulate group discussion so that it comes out my way?

(3) Do I as the leader participate by honest expression of my own attitudes but without trying to control the attitudes of others?

(4) Do I rely upon basic attitudes for motivation or do I think surface procedures motivate behavior?

(5) Am I willing to be responsible for those aspects of action which the board has delegated to me?

(6) Do I trust the individual member to do his job?

(7) When tensions occur, do I try to make it possible for them to be brought out into the open?

c. Conditions which the chairman tries to create.

(1) Opportunity for participation by all members. (Denial of opportunity paves the way for resistive behavior on the part of board members.)

(2) Freedom of communication about all facets of the programs or problems involved.

(3) A non-threatening psychological climate. The aim is to create a climate in which the individual board member is free from forces which he perceives as threats to self or self-concept and will actualize the positive constructive forces that are within him.

(4) Some functions of the Board Chairman

(a) Conveyance of warmth and empathy.

(b) Attending to what all members of the group have to say.

(c) Understand meanings and intents of what is said by the board members by questioning and restating what has been said.

(d) Conveyance of acceptance.

(e) Linking together what one person states with what has been said and the problem or issue at hand.

(5) Outcome

(a) Board members feel they are understood.

(b) Board members feel they are a member of a board not a pawn to be pushed around.

(c) The board member feels more accepted by others, feels more secure, more spontaneous, less defensive, less withdrawn, more confident, less dehumanized.

(d) The board feels the responsibility for evaluation lies within its members.

(e) Board members gain understanding of themselves and the other members of the board.

(f) There is a change from ego-centered participation as a board member to group-centered participation.

(g) There is a decrease in the dependence upon the leader.

(h) Acceptance of board standards.

3. The Board Member

a. Understands purpose, responsibility and functions of board of directors.

b. Has knowledge and language related to purpose of board.

(1) Can communicate

(2) Can deal with concepts, theories, analogies, etc.

(3) Examines own and other's concepts

c. Strength: recognizes it lies in membership of board as cooperative unit. Members not to be used as tools, but creative productive humans.

d. Secure

(1) Respects self

(2) Trusts others

(3) Not ego-centered or impulsive

(4) Will stand up for certain principles and convictions.

e. Sensitive both to an individual's needs and geo-political units characteristics.

f. Has concept of embryogony - knows where the beginning place is and what to expect and anticipate as the program develops.

g. Is human

Does not forget his own humaness when serving as member of board and is sensitive to the humans the programs serve.

STATE OF NORTH CAROLINA

DEPARTMENT OF HUMAN RESOURCES

Division of Vocational Rehabilitation Services

P. O. Box 26053

Raleigh 27611

March 21, 1975

MEMORANDUM

TO: Regional Directors of Vocational Rehabilitation Services
Regional Directors of Mental Health Services

FROM: Bob H. Philbeck
Assistant Director for Program Development and Analysis

Guy F. Hubbard
Assistant Director for Rehabilitation Services

Ann Wolfe, M.D.
Deputy Director for Mental Retardation Services

SUBJECT: UTILIZATION OF THE REGIONAL SHELTERED WORKSHOP SPECIALISTS AND REGIONAL MENTAL RETARDATION SPECIALISTS IN THE AREA OF COMMUNITY ADULT DEVELOPMENTAL ACTIVITY PROGRAMS

For years, the Division of Vocational Rehabilitation Services and the Division of Mental Health Services have jointly cooperated in the development of services for the adult mentally retarded population. Activities have varied but centered around sheltered workshop programs and their various components. With the recent expansion of Adult Developmental Activity Programs, components in the community and the move to regionalization, it is imperative that the Regional Sheltered Workshop Specialist and Regional Mental Retardation Specialist work jointly in the: (2) monitoring of program standards (b) annual program reviews (c) providing program consultation (d) technical assistance and (e) staff training; thereby providing a continuous upgrading of services to the handicapped persons. The following is a clarification of the role of the Regional Sheltered Workshop Specialist and Regional Mental Retardation Specialists relative to Adult Developmental Activity Programs.

Regional Sheltered Workshop Specialists shall be responsible for:

1. The monitoring of program standards and annual program review as relates to the Evaluation Components in an Adult Developmental Activity Program.

2. The monitoring of program standards and annual program review of those Adult Developmental Activity Programs that develop

(initially or at a later date) a Work Activity Component that utilized sub-contract work or the manufacturing of goods to be sold.

3. To consult, upon request, in the development and/or expansion of an Adult Developmental Activity Program.

4. Jointly plan and review new project proposals for Adult Developmental Activity Program with the regional mental retardation specialist.

Regional Mental Retardation Specialist shall be responsible for:

1. The planning and coordination with local groups in the development of new Adult Developmental Activity Programs which may include:

   a. assistance in development of program proposal.

   b. the interpretation of Adult Developmental Activity Program standards.

   c. the identification of start-up funds.

2. The certification of the client population in an Adult Developmental Activity Program based on information provided by the Division of Vocational Rehabilitation Services and other appropriate information.

3. The development of a contractural agreement with each Adult Developmental Activity Program not a part of an area mental health program.

4. The accounting of mental health subsidy funds (including Title VI).

5. The on-going monitoring of program standards, annual program reviews and program consultation; with exceptions of the Adult Developmental Activity Program standards pertaining to (1) Evaluation Component, and (2) Work Activity Component. Rationale being the Regional Sheltered Workshop Specialist has the expertise in these two areas as our Adult Developmental Activity Program evaluation sections standards are basically the Level I standards as set forth in the NORMS FOR WORKSHOPS AFFILIATED WITH AND UTILIZED BY THE NORTH CAROLINA DIVISION OF VOCATIONAL REHABILITATION SERVICES, and our Adult Developmental Activity Program standards pertaining to Work Activity Component as relates to state and federal wage and hour laws, and Social Security regulations.

The Regional Mental Retardation Specialist may in his or her discretion delegate any or all of the above to the Area Mental Health Center (Area Mental Retardation Specialist).

An assertive effort should be made to initiate the above as soon as possible by total cooperation with appropriate Mental Health and Vocational Rehabilitation Services staff.

cc: Mr. Claude A. Myer
N. P. Zarzar, M.D.
Mr. Richard Parker
Mr. A.C. Whisenhunt
Mr. Frank H. Meece, Jr.
Mr. Glenn Hill, President, N. C. Workshop Association
Regional Sheltered Workshop Specialists
Regional Mental Retardation Specialists

SAMPLE JOB DESCRIPTION

POSITION: Director/Coordinator of an Adult Developmental Activity Program. (In a small ADAP, one person may perform all the duties described here, but in larger programs, these duties are divided between 3-4 staff persons: Director, Coordinator, Sub-Contract Procurement Person, Production Supervisor.)

SPECIFIC TASKS REQUIRED IN POSITION:

Administration-related Tasks

1. To ensure compliance of ADAP with local, state, and federal laws and regulations
2. To carry-out policies, procedures and guidelines as set by the Board of Directors
3. To prepare annual budget which identifies ADAP expenses
4. To supervise client wage ratings to ensure commensurate earnings
5. To ensure the required staff/client ratio in ADAP
6. To seek, write and secure grant support to broaden, strengthen ADAP services whenever possible
7. To evaluate program on an on-going basis and implement necessary steps toward improvement of program
8. To make available to ADAP clients a program with patterns and conditions of everyday life which are as close as possible to the norms and patterns of the mainstream of today's society by
   a) operating on a normal pattern for the year, with holidays and vacations
   b) providing a program which involves a mixture of both sexes
   c) providing compensation for work done in ADAP in the form of a paycheck
   d) maintaining the decor of facility in adult manner
9. To interview staff applicants and employ necessary personnel
10. To prepare and provide or secure staff training in the following areas: precision instruction, task analysis, normalization, behavior shaping techniques, types and nature of developmental disabilities
    a) initial orientation
    b) on-going staff training
11. To evaluate staff performance and make appropriate recommendations
12. To appoint and supervise committees:
    a) Safety Committee
    b) Human Rights Committee
    c) Social Committee
    d) Legal Rights Committee
    e) Other
13. To ensure the confidentiality of records, files, and individual services provided
14. To serve as liaison with local group homes
15. To assume responsibility for the location or re-location of ADAP services to ensure adult image, central location near transportation routes, etc.
16. To set-up, arrange and supervise an effective transportation program
    a) public transportation training program
    b) car pools
    c) ADAP van system
    d) private

17. To establish client related policies
    a) medical emergency plan
    b) injury reporting system
    c) medication policies
    d) grievance policies
    e) program rules and regulations
18. To purchase equipment, supplies, and services as appropriate to the ADAP

Programmatic Coordination Tasks

19. To supervise the ADAP to ensure compliance with State Standards in regards to:
    a) Administrative requirments
    b) Client eligibility for subsidy payments
    c) Admission/discharge policies
    d) Evaluation process
    e) Individual Program Services
    f) Documentation of services in client files
20. To design, plan, schedule and set-up guidelines for activities to teach community living skills as indicated necessary by Progress Assessment Charts
21. To identify, assign and schedule staff instructional responsibilities
22. To provide counseling as appropriate to individual client needs
23. To set forth in writing
    a) objectives and purposes of ADAP
    b) current activities and services of ADAP
24. To work with local D.S.S. to sub-contract ADAP services and supervise the application processes
25. To work and coordinate efforts with Regional and Area MR Specialists in Mental Health
26. To serve on ADAP Admission committee and ensure that admission criteria are met
27. To participate and prepare for client/staff meetings
28. To involve the family and/or sponsoring agency when possible and appropriate
29. To work with other agencies to secure needed services - such as: physical therapy, speech therapy, counseling, family planning, social services, social security
30. To document in individual files, agency referrals contacts, etc.
31. To set-up an "in-house" referral system to facilitate each client receiving the training appropriate to his/her individual needs
32. To schedule and supervise annual re-evaluations and write summary reports in cooperation with Evaluator and Instructor
33. To identify and outline criteria necessary to move from ADAP to other programs oriented towards higher levels of individual functioning and employ programs and methods that will facilitate this movement (i.e. sub-contract training, behavior modification units, etc.)

Production-related Tasks

34. To visit private industries to procure sub-contracts and figure labor and bid costs
35. To set prices for products produced
36. To ensure quality control in products produced in ADAP
37. To supervise work production and instruction
38. To keep inventory of all supplies and equipment

SAMPLE OUTLINE FOR A MANUAL OF OPERATIONS

A Manual of Operations should be developed to provide information to the board, staff, and purchasers of service and for the training of new employees. It should contain general policies, shop regulations, descriptions of programs, and services offered by the shop and its relationship to other cooperating agencies. An outline for such a manual might be the following:

I. General Policies and Organization
   - A. Policy
   - B. Purpose
     1. General Objectives
     2. Specific Objectives
   - C. Organization

II. Personnel Policies
   - A. A Job Description for Each Staff Position
   - B. Hiring Policies
   - C. Salaries and Employee's Benefits (i.e. hospitalization, retirement, etc.)
   - D. Working Hours
   - E. Leave
   - F. Sick Leave
   - G. Jury Duty
   - H. Personal Records
   - I. Leave Records
   - J. Termination of Service
   - K. Staff Development
   - L. Holidays
   - M. Workmen's Compensation
   - N. Overtime and Extra Duties

III. Safety and Fire Regulations
   - A. Safety and Fire Committee
   - B. Fire
     1. Fire Drills
     2. Fire Response and Personnel Assigned
     3. Fire Extinguishers
   - C. Fire and Safety Inspections
   - D. Fire and Accident Reports
   - E. Safety Equipment (goggles, gas masks, etc.)
   - F. Responsibility of Work Areas (assignments)
   - G. Smoking

IV. Adult Developmental Activity Program
   - A. Evaluation
   - B. Adult Basic Education
   - C. Personal and Social Adjustment
   - D. Work Activity
   - E. Community Integration
   - F. Recreation
   - G. Socialization

V. Cooperating Agencies
   A. Vocational Rehabilitation
   B. Mental Health
   C. Psychiatric Hospital Serving the Area
   D. Social Service Department
   E. Public Health Office
   F. Employment Service
   G. Public School Systems
   H. United Funds
   I. County and City Government
   J. Etc.
   (Should state relationship to each agency, referral, purchaser of service, financial support, etc.)

VI. Policies Involving Subcontracts and Work
   A. Conditions of Accepting Subcontracts and Work
   B. Bidding Policies
   C. Etc.

VII. Professional Organizations Member
   A. Sheltered Workshop Association
   B. National Rehabilitation Association
   C. Association for Retarded Citizens
   D. Etc.
   (Each item of the outline should be defined in detail, including a rationale when pertinent. The programs should allow for flexibility, but it must be recognized that flexibility does not come from nebulosity but is always preceded by some structure.)

WORKMEN'S COMPENSATION

An Adult Developmental Activity Program that employs four or more employees (staff) is required to have Workmen's Compensation Insurance.

For additional information contact the:

North Carolina Industrial Commission
4000 Old Wake Forest Road
Raleigh, North Carolina
Telephone - 829-3201

UNEMPLOYMENT

An ADAP may also wish to investigate the possibility of obtaining unemployment insurance for staff. For information, the ADAP should contact the local office of the Employment Security Commission of North Carolina.

SAMPLE

OUTLINE FOR STAFF ORIENTATION TRAINING

An ADAP in-service orientation program for new employees should include a minimum of 10 hours of training sessions which include:

I. Orientation
   - A. Tour of Program
   - B. Explanation of program and services
   - C. Funding, Standards, Certifications
   - D. Orientation to ancillary services
   - E. Familiarization with personnel structure and various job descriptions
   - F. Explanation of Personnel Policies and Procedures Manual
   - G. Emergency Procedures, etc.

II. Client abilities and disabilities
   - A. Mental Retardation
   - B. Cerebral Palsy
   - C. Epilepsy
   - D. Other

III. Techniques and philosophies
   - A. Normalization
   - B. Work
   - C. Progress Assessment Chart
   - D. Individual Goal Planning
   - E. Behavior Shaping
   - F. Precision Instruction

TECHNIQUES FOR DEVELOPING SUBCONTRACTS

There are three requirements for the development of new subcontracts: (1) a plan, (2) leg work, and (3) the potential of the shop to complete it.

Planning for the development of new subcontracts requires consideration of a number of factors.

A. What are the industries or businesses in the community which might supply the workshop with subcontracts and where might you go to get this type of information?

(1) Possibly the best resource is by word of mouth, taking leads from that information that is volunteered by friends of the shop, board members, parents of the clients, employers with whom you have contact, customers to whom you might already be selling services, etc.

(2) In many cases word of mouth is not sufficient. A second resource in the community is the Chamber of Commerce. This agency usually has a listing of all industries and/or businesses in the community. Along with the names of the industries are usually detailed descriptions of the products and/or services offered by this business. Some Chambers of Commerce can supply the names of officers; i.e., president, general manager, personnel officer, purchasing agent, etc.

(3) A third resource for information on businesses in the community may be the local Employment Security Office. This office should have a listing of all business operations that have employees. There are usually descriptions of the types of work performed in the business and the skills required to perform such work.

(4) A fourth resource for leads and information about businesses in the community is Civic Clubs; i.e., Rotary, Exchange, Lions etc. Often workshop personnel are asked to speak to these groups about their shops. These invitations should never be turned down. Good preparation should go into these talks and a sense of excitement and interest should be exhibited by the speaker. Within these talks should be a description of the types of work the sheltered workshop is able to handle. And an invitation should be offered the businessmen to visit the shop, see the clients working and explore the capabilities of the workshop completing work they may wish to subcontract out.

(5) A fifth resource for leads is a mailing which advertises the workshop and the kind of services which it can offer. This type of advertisement should be well put together in a very business-like manner. The workshop should not play upon the sympathy or charitable resources of the businesses to which the flyers are mailed. If the services offered by the workshop are: assembly, mailings, envelope stuffings, recovery, duplication, etc., the advertisement should state the capabilities of the shop in these areas in business and technical terms.

Five hundred mailings of this type would cost only about $55.00 including postage and materials. The average number of returns from this mailing is about 10% (50). Of these fifty there will probably be only five good leads which can possibly supply you with subcontract work. It has been proven many times over that the expense and time involved in this activity is well worth the results. At times only one contract is worth it.

B. The person who is charged with the solicitation of subcontracts should have time available which is designated for this activity alone. Intensity and frequency of calls is very important. If a workshop director , for example, tries to fit this in around other activities, he will find the other activities take most of his time and he will continue to put off approaching the possible customer. The psychology of this is very simple. There is a condition called "approach anxiety" which all salesmen develop to some degree when they approach a customer to make a sale. Actually this anxiety is a fear of being told "no" by the customer. No one likes to be told "no". Many poor or inexperienced salesmen fearing the response of "no" will find ways of avoiding the customer whom he feels is most likely to say "no". And in many cases he will avoid customers who would have bought his product or services.

Good salesmen are those persons who accept the "no" from one customer and proceed directly to the next with the intention of selling. One "no" or 500 "no's" is not the end. As conditions exist in business today, it is necessary to make many calls to make the good sale. And it is the salesman who can accept the "no" without bewilderment that will make the good sale.

The workshop director who needs subcontracts, and has no subcontract procurement officer, should arrange this time in order that he has periods of up to two days in which his major activity is subcontract procurement and the other activities are fitted around this. At times it may be necessary to set aside two days a week for several weeks in order to get sufficient work into the shop.

C. The steps up to this point are (a) get the leads, (b) structure the time to follow up the leads. The third step is following up the leads. Arrange an itinerary for a day. Begin with the lead that is geographically closest to the shop and proceed outward in this fashion. In a day's working time you should expect to meet five to six potential customers. That is if they are not separated in distance by many miles.

There are many ways to approach a customer. One is to phone and ask for an appointment. In some cases this is appropriate and may be the best procedure. One should realize, however, that it is much easier to say "no" over the telephone than it is face to face.

I personally prefer the "cold turkey" method for those customers in my home community. That is, calling on the customer at his office without prior warning. If he is unable to see me at that time, I will make an appointment with his secretary for some future meeting. If the customer is located out of town or requires considerable travel, it would be wise to make prior contact. When allowed into the customer's office do not act as if you are in a hurry. Take time to describe your service and tell him what it is you have to sell that he may be able to use. If his time is short, he will usually tell you the amount of time he has to spend with you. If he does not tell you this, you should be sensitive to his behavior in the sense that when he feels it is time to end the meeting his behavior will change to that of a wrapping-up nature. This may be different from one customer to the next but if you are aware of and sensitive to him, you will recognize it.

Make your sales pitch succinct and as plain as possible. However, do not rush through it and do not sit on the edge of your seat as if you are in a hurry to get out of his office. Allow him to ask questions at any point in the meeting and when he is talking, listen without impatience. If you do not know the person in the business who handles the subcontracts or purchasing, approach the highest level of management possible. If he is not the right person, he will direct you to the right person. It never hurts to be known by top management.

D. Before you approach a potential customer, you should know the potential of your shop. (1) The amount of storage space you have. (2) The man-hour potential you have within a day, week, month--relate this to man-hours provided by non-handicapped individuals. (Estimate a client's productivity as a percentage of a non-handicapped person's productivity.) (3) The equipment you have available to complete work. (4) Your ability to transport materials and finished products, etc. Know both your potential and limitations. Do not accept or solicit subcontracts you cannot complete or meet the necessary quality requirements. Being unable to produce what you said you could or what you sold is destructive to the possibilities of follow-up or new subcontracts.

In developing new contracts allow for the time required by the Clients in counseling, rehabilitation and evaluation programs.

E. Remember the essentials to successful subcontract solicitation is (1) knowledge of industries in your area, (2) the development of good leads, (3) knowledge of your shop's potential and a very important factor, (4) "leg work", intensity and good salemanship.

For further information on soliciting subcontracts see:

Selling to Industry for Sheltered Workshops
U.S. Department of H.E.W.
Social Rehabilitation Service
Rehabilitation Services Administration
Washington, D.C. 20201

DHEW Publication No. (SRS) 74-25072

Work Contracts from Non-Manufacturers -
When an ADAP Center is located in an area where there is little or no manufacturing, it may be necessary to compile a special prospect list of sources which are not manufacturers. Such sources often have greater need for services than manufacturers who have their own production facilities.

Ideas for Work Contracts from Non-Manufacturers

Source	Type of Work or Service
School system or university	Refinishing desk tops. Cleaning athletic equipment. Janitorial supplies. Book repairs.
Insurance and data processing	Collating sales kits. Salvaging data cards.
Bottling company	Salvaging 6-pack chipboard containers.
Libraries	Repairing and rebinding books. Processing new books.
State, county, or municipal purchasing department	Janitorial supplies. Office supplies. Furniture repair.
Distributor or wholesaler	Develop private brand product line. (You make it; he sells it.)
Printer or publisher or newspaper	Glueing, assembling displays. Inserting, mail services. Folding, stapling.
Trade magazine	Processing inquiry cards (bingo cards).

Advertising department or agency	Clipping services. Collating sales kits. Assembling displays. Typing lists. Advertising specialties. Imprinting. Assembly. Packaging. Mailing.
Importer	Inspection and dropshipping.
Supermarket	Repairing shopping carts.
Building supply houses	Assembling aluminum screens.
Banks	Mailing operations. Key punch training and work.
Air conditioning services	Cleaning. Salvaging. Wiring.
Chicken growers	Repairing shipping crates and supplying new crates (wood).
Research laboratory	Packaging. Inventorying. Cleaning bottles, etc.
Hospital or institution	Photo copying records.
Farms	Packaging. Sorting. Grading (apples, potatoes, nuts, seeds, etc.).
Telephone company	Cleaning instruments. Folding and stuffing envelopes. Mailing coins to customers. Typing lists. Salvaging punch cards and phones books.
Power company	Typing lists and mailing operations. Salvaging punch cards and paper.
Sales agent or entrepreneur with established distribution in volume	Assemble and pack and dropship complete product line according to specifications.

WAGE AND HOUR

If an Adult Developmental Activity Program uses work (sub-contract, manufacturing, or other) in their program, then the Fair Labor Standards Act applies to their operation. In general, this act applies to employees engaged in interstate commerce or the production of goods for interstate commerce, and to employees in certain large enterprises. Typical activities found in sheltered workshops and Adult Developmental Activity Program Centers which are generally of interstate character include: Sub-contract work; making of new goods - prime manufacturing, collection of used materials from households, primarily sorting of such material and handling, packing, or transporting of the salvage; and office work. Other activities may also come under the law. In general, the Fair Labor Standards Act applies to both clients and staff who directly or indirectly perform work covered by the law.

Adult Developmental Activity Programs must also be in compliance with the Child Labor Law. This law requires that, with few exceptions, children under 16 may not engage in covered Fair Labor Standards employment. For certain hazardous occupations the Fair Labor Standards minimum age is 18. The child labor provisions are explained in Child Labor Bulletin number 101.

Newly established Adult Developmental Activity Programs should apply for a Work Activity certificate (form WH228) by filing form WH226 with:

United States Department of Labor
Wage and Hour Administration
1371 Peachtree Street, N.E.
Room 331
Atlanta, Georgia 30309

STATE AND FEDERAL EMPLOYER IDENTIFICATION NUMBERS

If an ADAP is a division of a governmental unit, political sub-division or corporation you may use the Employer ID number of the parent organization.

If the parent organization is presently registered as non-profit, the ADAP is covered under the parent organization's status.

However, if the ADAP is being created by a non-registered group, it will be necessary to make application to the Internal Revenue Service for a Federal Employer Identification Number (Form SS4) and Non-Profit registration. You can obtain the appropriate forms and advice by contacting your local I.R.S. Office.

To obtain an Employer's State Identification number an ADAP must contact the local Department of Revenue.

INTERNAL REVENUE SERVICE - SOCIAL SECURITY

The Adult Developmental Activity Program shall comply with all applicable provisions required by the Internal Revenue Service in reference to withholding Social Security of clients. An Adult Developmental Activity Program that uses sub-contract or manufacturing work as a part of their program shall file a waiver certificate (Form SS-15 and SS-15a) with the Internal Revenue Service Center, 3131 Democrat Road, Memphis, Tennessee, 38110, and withhold Social Security on all clients whose earnings amount to $50.00 or more during a calendar quarter. Public, non-profit facilities do not qualify to file a SS-15 even though they have been granted an exemption for income tax as an organization described in Section 501 (C) (3) of the IRS code. Such an organization should contact the appropriate state official (IRS) for information on acquiring and reporting Social Security coverage.

NOTE: An application for federal employer identification number (Form SS-4) must be filed before or at the same time as SS-15 and SS-15a.

The above policy of requiring filing of the waiver form SS-15 is a mental health policy to determine eligibility for the receipt of mental health subsidy, not as IRS policy.

Those ADAP's that have not filed form SS-15 but have been withholding FICA on staff, clients or employees for 20 quarters are covered under bill H.R. 15571.

For assistance in filling out Forms SS-4, SS-15, SS-15a or for additional information and literature, write:

Internal Revenue Service
P. O. Box 20541
Greensboro, North Carolina 27420
Toll free telephone number: 1-800-822-8800

SAMPLE

AFFIRMATIVE ACTION PLAN FOR
(ADAP OR SHELTERED WORKSHOP)

I. Equal Employment Policy Statement:

The_____supports the provisions adopted by the North Carolina Department of Human Resources from Title VI of the 1964 Civil Rights Act which state that "Neither race, color, religion, sex nor national origin is to be considered in recruitment and employment of employees; the promotion, demotion, transfer, lay off, termination, training and development, and in the establishment of rates of pay, including the awarding of salary adjustments and merit salary increments". In addition the_____ issues the following statement on hiring the minority and women for positions as they become available and seek assistance from all possible channels on locating qualified applicants from this group".

II. Program Responsibility:

In addition to the statement assuring equal employment by the_____
(Director, etc)
the_____has taken responsibility for implementing equal employment standards on the following policy statement. _____will provide equal employment opportunities with the consideration of applicants and employees being strictly on the basis of qualifications and potential without regard to extraneous factors such as race, politics, religion, nation origin, age, sex or physical disabilities.

III. Communication of Policy:

Internally the equal opportunity employment policy is communicated orally to each employee and is also written in the Personal Policy statement of_____which is given to each job applicant. Externally the employment policy is communicated orally and by letter to each potential source of applicants. Employees for_____are recruited from the following

channels: List: (example, Employment Security Commission, Operation Concern, PACE, Project Transition, Community Colleges, classified ads, etc.) All potential sources are contacted when job openings are available. This policy is the responsibility of the_____, to implement.

IV. Administration of Policy:

The_____in administering equal employment opportunity practices continues to hire women and minority groups.

V. Goal:

By_____all phases of the Affirmative Action Plan will be implemented.

VI. Job Structuring:

One of the objectives of the administration of_____is to review job standards and specifications to determine if they are relevant and necessary. Job specifications are also examined to see if there are any unnecessary and/or discriminatory restrictions that might bar minority employees from securing employment in entry level positions. Thus, it is an objective to make education and experience requirements of each particular job as flexible as possible. _____works with all sources of employment in screening them out of_____.

VII. Recruitment:

To actively recruit employees through as many channels as possible is one of the objectives of the administration so as to maximize contacts with minority groups. Recruitment efforts are also made in conjunction with the Employment Security Commission and other sources of employees who operate under the principles of equal employment opportunity. _____is assisted by other agencies_____(list other agencies or groups) in referring interested minority applicants to us. Further, we actively recruit minority employees by contact with minority employees working for us who might have contacts with other interested minority and women. Agencies

in the area regularly refer potential applicants to be interviewed by the _____.
(director)

VIII. Selection:

_____interviews applicants for all employee positions. Subsequently, _____(other staff) involved in direct line supervision of that job assists in the selection process. Final concurrance of the _____(may be or is) required.
(director)

IX. Appointment and Placement:

Appointments for positions are made by_____and placement is determined by_____.
(director, etc.)

X. Staff Development and Career Planning:

If is the policy of_____that promotions are based on merit and not on extraneous factors. Every promotion under our system is preceded by an evaluation of the employee by the supervision to determine competance to do the higher level work. Staff development and training are highly encouraged through participation in seminars, lectures, in-service training, visits to other facilities, reading literature in the field of developmental disabilities, staff meetings and additional college courses. Employees are encouraged to upgrade their skills and thereby become eligible for future career advancements. It is the responsibility of the administration to notify employees of dates for opportunities for participating in any of the above activities.

XI. Appeal Process:

Appeals by employees for discriminatory practices or unsatisfactory work conditions shall be made in persons to the_____accompanied by a
(director, etc.)
written and signed statement by the employee. Such appeals shall be received by the_____and given thoughtful consideration. No employee
(director, etc.)
will be terminated because of appeals. Employment will be terminated because of unsatisfactory job performances (negligence, irresponsibility, and

undependability) or excessive absences. Employees will have the right to appeal to the _____ if they so desire.
(Board of Directors or Area Board)

XII. Work Environment:

Employees of _____ are placed on a non-segregated basis. Employees are given equal opportunities for the working environment to be not only pleasant and cheerful but also conducive to an atmosphere which encourages employees to exhibit their best. Benefits available to _____ employees include: List: (example, paid holiday, sick leave, death leave, retirement, and disability insurance, hospital insurance, workman compensation, etc.)

XIII. Program Evaluation:

The administration of _____ will keep reports on a scheduled basis once plans and objectives have been set. An analysis of this data will help identify and prepare strategies to remove obstacles to the hiring of minorities and women. The salary ranges will recognize length of service and efficiency in job performance, as well as recognizing prior experience and training above minimum requirements. A program performance evaluation system will be initiated by _____ called "Management by Objectives", a part of which includes a question to be asked every employee by his supervisor. The question is, "How can I better help you do your job?" The response to this question will be evaluated by management to determine training needs for all staff.

OCCUPATIONAL SAFETY AND HEALTH ACT (O.S.H.A.)

The Occupational Safety and Health Act of 1970 became a law on December 29, 1970, and became effective on April 28, 1971. Its purpose is:

> "To assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for the research, information, education, and training in the field of occupational safety and health; and for other purposes."

This law applys to staff and clients in an A.D.A.P. and calls for the keeping of certain accident and injury records. Failure to maintain these records may result in a heavy fine. Specifically, each injury must be recorded on Form 100 within six days after knowledge of the injury. Detailed records of each accident and illness are to be recorded on Form 101 (Workmen's Compensation Form - N. C. 19 can be substituted for the above Form 101 with two additions - client's Social Security number and case or file number). An annual summary of all information recorded for the year must be reported on Form 102.

For additional information and the necessary forms for compliance, please write the North Carolina Department of Labor, Occupational Safety and Health Administration, Raleigh, North Carolina.

LICENSE INFORMATION

I. Local - each county or municipality requires the registration and purchase of a "use" or "privilege" license to conduct any type of business establishment in their jurisdiction. This license is usually purchased at a city hall, tax office or county courthouse, and is renewed annually. This certificate will indicate the type of business products and/or services the ADAP supplies.

II. State - for each income producing product or service the ADAP may sell, there will usually be license purchase requirement, but in some instances one license will cover many products or services.

At a minimum you should register as a Merchant and obtain a Certificate of Merchants Registration. (You should contact your local State Revenue Office for complete details and advice.)

HANDICAPPED SECTION OF THE NORTH CAROLINA BUILDING CODE

North Carolina has a uniform building code which regulates building construction to protect the health, safety, and welfare of the public. Recent modifications to the building code have established minimum requirements which affect the design of almost all new and remodeled buildings in the State to make them accessible to and usable by physically handicapped persons.

These requirements have been fully illustrated in An Illustrated Handbook of the Handicapped Section of the North Carolina State Building Code.

In addition to An Illustrated Handbook, the Special Office for the Handicapped has produced Accessibility Modifications: Guidelines for Modifications to Existing Buildings for Accessibility. This new book is an illustrated working guide showing how to study a building, determine its problems, and make design recommendations for budget review and architectural implementation.

Both publications are available at a minimal cost from the North Carolina Department of Insurance, Engineering Division, P. O. Box 26387, Raleigh, North Carolina 27611.

SAMPLE

INJURY REPORT FORM

DATE OF ACCIDENT _____

NAME OF INJURED _____

SUPERVISOR _____

DEPARTMENT _____

TYPE OF INJURY MINOR ( ) SUB.MAJOR ( ) MAJOR ( )

DESCRIBE ACCIDENT _____

_____

CAUSE _____

_____

LOCATION OF INJURY ON BODY _____

_____

DOCTOR'S NAME _____

TIME OF ACCIDENT _____

SAMPLE

POLICY FOR MEDICAL EMERGENCIES

When a client is seriously injured and needs medical attention the following should occur:

1. Instructor must decide whether

   a. ADAP should take client to hospital

   b. To call an ambulance

2. If ADAP is to take client to the hospital, Instructor must send someone to inform proper Coordinator of situation.

3. Coordinator to arrange for vehicle and driver.

4. Instructor to get client in vehicle.

5. Coordinator must determine if this is a Workman's Compensation claim. If this is not a Workman's Compensation claim, Coordinator must contact parents to inform them of their responsibilities.

6. If necessary, Coordinator to accompany client and driver.

7. Client should be taken to the local county Hospital Emergency Room (There is a doctor on duty at all time.)

8. If this is a Workman's Compensation claim, Emergency Room Secretary should be told this and given ADAP's name.

9. Instructor must fill out (2 copies of) INJURY REPORT and give them to the appropriate person the same day of the accident.

SAMPLE MEDICATION POLICY

1. ADAP Clients should take and leave the medication at home whenever the medication schedule permits.

2. No medication shall be administered to a client without a written prescription from doctor.

3. If medication must be taken during the hours of ADAP participation, the ADAP should have a systematic training program to help each client become less reliant on medication administration by ADAP staff and more self-reliant regarding medication usage.

4. Any medication administered by ADAP staff must be plainly labeled with the name, address and registry number of the pharmacy; name of the physician; date of dispensing and name of dispensing pharmacist; client's name; directions for use; and the name of the drug.

5. The Instructor will be responsible for assuring that the client maintains the prescribed medication schedule.

6. Any unused medication should be mailed to client or guardian at home address.

7. Medications for all clients shall be reviewed every six months.

8. ADAP Coordinator to talk with client and family if any side effects of medications are suspected.

9. Coordinator to seek advice of consulting physician if medication-related questions arise.

SAMPLE

Medication Usage Task Analysis
Assisted -- Unassisted

I. Taking Medication
   A. holds container
   B. removes cap
   C. hold out hand
   D. dispenses pills
   E. gets correct # of pills

II. Selecting the proper medication
   A. discriminates color pills/container
   B. discriminates capsules from pills
   C. selects correct container
   D. picks up container

III. Knowing when to take medication
   A. matches clock faces
   B. relates schedule to medication
   C. tells time
   D. remembers to take
   E. requests medication (if stored at program)

IV. Responsibility for medications
   A. keeps medication put away
   B. does not offer medication to others

V. Getting prescriptions
   A. knows when out
   B. makes own appointment
   C. gets own prescription

SAMPLE

HUMAN RIGHTS Committee
FOR
_____

The Human Rights Committee shall be responsible for the protection of the rights and welfare of all clients participating in _____ ADAP.

I. Committee Membership: (List names, occupation or position, memberships, degree, and backgrounds pertinent to the area of Mental Health and Mental Retardation.)

II. Role and Responsibility of the Committee

The Human Rights Committee of _____ shall meet____ to review the activities of the facility, the methods used in dealing with clients, behavior modification procedures, disciplinary procedures, etc. to assure that the human rights of the clients are not being violated. Minutes of each Committee meeting shall be kept.

The review will be made by (1) questioning the staff, (2) by on-site visits to the facility, and (3) by talking with the clients.

The existence of the Human Rights Committee, and its function shall be communicated to all clients. Information relative the the Human Rights Committee shall become a permanent part of the client orientation process. Each client will be made aware of his right to appeal to the committee at any time that he feels that his/her human rights have been abused.

The Human Rights Committee gives its assurance that it shall take all steps necessary to assure that clients are not harrassed, made uncomfortable, or that their privacy is invaded, or their dignity threatened. The Committee gives its further assurance that the rights and welfare of the clients involved in the programs and/or projects are adequately protected, that the risks to an individual are outweighed by the importance of the knowledge to be gained, and that informed consent is obtained by methods that are adequate and appropriate.

DECLARATION OF GENERAL AND SPECIAL RIGHTS OF THE MENTALLY RETARDED

The DECLARATION OF GENERAL AND SPECIAL RIGHTS OF THE MENTALLY RETARDED, adopted by the International League of Societies for the Mentally Handicapped, in Jerusalem, Israel, October, 1968:

Article I

The mentally retarded person has the same basic rights as other citizens of the same country and same age.

Article II

The mentally retarded person has a right to proper medical care and physical restoration and to such education, training, habilitation and guidance as will enable him to develop his ability and potential to the fullest possible extent, no matter how severe his degree of disability. No mentally handicapped person should be deprived of such services by reason of the costs involved.

Article III

The mentally retarded person has a right to economic security and to a decent standard of living. He has a right to productive work or other meaningful occupation.

Article IV

The mentally retarded person has a right to live with his own family or with foster parents, to participate in all aspects of community life, and to be provided with appropriate leisure time activities. If care in an institution becomes necessary, it should be in surroundings and under circumstances as close to normal living as possible.

Article V

The mentally retarded person has a right to a qualified guardian when this is required to protect his personal well-being and interest. No persons rendering direct services to the mentally retarded should also be his guardian.

Article VI

The mentally retarded person has a right to protection from exploitation, abuse and degrading treatment. If accused, he has a right to a fair trial with full recognition being given to his degree of responsibility.

Article VII

Some mentally retarded person may be unable due to the severity of their handicap, to exercise for themselves all of their rights in a meaningful way. For others, modification of some or all of these rights is appropriate. The procedure used for modification or denial of rights must contain legal safeguards against every form of abuse, must be based on an evaluation of the social capability of the mentally retarded person by qualified experts and must be subject to periodic reviews and to the right of appeal to higher authorities.

ABOVE ALL -- THE MENTALLY RETARDED PERSON HAS THE RIGHT TO RESPECT

LEGAL SERVICES FOR DEVELOPMENTALLY DISABLED PERSONS

Effective October 1, 1976, the Child Advocacy Section of the Office for Children will be able to provide legal services for developmentally disabled persons. The Office for Children has entered into a contract with Prepaid Legal Services Corporation. Under the contract, persons may retain a local attorney to represent developmentally disabled persons. The attorney would be reimbursed by Prepaid Legal Services.

For further information contact:

Al Singer
Office for Children
325 N. Salisbury Street
Raleigh, North Carolina 27611

Telephone (919) 829-3111

NORTH CAROLINA LAWS

For information on recent North Carolina laws regarding handicapped persons write:

Director
Special Office for the Handicapped
North Carolina Department of Insurance
P. O. Box 26387
Raleigh, North Carolina 27611

Telephone (919) 829-2203

For a copy of Rud Turnbull's book, The Law and the Mentally Handicapped in North Carolina, write:

Office for Children
325 N. Salisbury Street
Raleigh, North Carolina 27611

(Cost: $3.00)

GENERAL STATUTES OF NORTH CAROLINA

CHAPTER 168

HANDICAPPED PERSONS.

Article 1.

Rights.

Sec.
168-1. Purpose and definition.
168-2. Right of access to and use of public places.
168-3. Right to use of public conveyances, accommodations, etc.
168-4. May be accompanied by guide dog.
168-5. Traffic and other rights of persons using certain canes.
168-6. Right to employment.
168-7. Guide dogs.
168-8. Right to habilitation and rehabilitation services.

Article 1.

Rights.

§ 168-1. Purpose and definition. - The State shall encourage and enable handicapped persons to participate fully in the social and economic life of the State and to engage in remunerative employment. The definition of "handicapped persons" shall include those individuals with physical, mental and visual disabilities. For the purposes of this Article the definition of "visually handicapped" in G.S. 111-11 shall apply. (1973,c.493,s.1.)

§ 168-2. Right of access to and use of public places. - Handicapped persons have the same right as the ablebodied to the full and free use of the streets, highways, sidewalks, walkways, public buildings, public facilities, and all other buildings and facilities, both publicly and privately owned, which serve the public. (1973,c.493,s.1.)

§ 168-3. Right to use of public conveyances, accommodations, etc. - The handicapped and physically disabled are entitled to accommodations, advantages, facilities, and privileges of all common carriers, airplanes, motor vehicles, railroad trains, motor buses, streetcars, boats, or any other public conveyances or modes of transportation; hotels, lodging places, places of public accommodation, amusement or resort to which the general public is invited, subject only to the conditions and limitations established by law and applicable alike to all persons. (1973,c.493,s.1.)

§ 168-4. May be accompanied by guide dog. - Every visually handicapped person shall have the right to be accompanied by a guide dog, especially trained for the purpose, in any of the places listed in G.S. 168-3 provided that he shall be liable for any damage done to the premises or facilities by such dog. (1973,c.493,s.1.)

§ 168-5. Traffic and other rights of person using certain canes. - The driver of a vehicle approaching a visually handicapped pedestrian who is carrying a cane predominantly white or silver in color (with or without a red tip) or using a guide dog shall take all necessary precautions to avoid injury to such pedestrian. (1973,c.493,s.1.)

§ 168-6. Right to employment. - Handicapped persons shall be employed in the State service, the service of the political subdivisions of the State, in the public schools, and in all other employment, both public and private, on the same terms and conditions as the ablebodied, unless it is shown that the particular disability impairs the performance of the work involved. (1973,c.493,s.1.)

§ 168-7. Guide dogs. - Every visually handicapped person who has a guidedog, or who obtains a guide dog, shall be entitled to keep the guide dog on the premises leased, rented or used by such handicapped person. He shall not be required to pay extra compensation for such guide dog but shall be liable for any damage done to the premises by such a guide dog. (1973,c.493,s.1.)

§ 168-8. Right to habilitation and rehabilitation services. - Handicapped persons shall be entitled to such habilitation and rehabilitation services as available and needed for the development or restoration of their capabilities to the fullest extent possible. Such services shall include, but not be limited to, education,training, treatment and other services to provide for adequate food, clothing, housing and transportation during the course of education, training and treatment. Handicapped persons shall be entitled to these rights subject only to the conditions and limitations established by law and applicable alike to all persons. (1973,c.493,s.1.)

STATE OF NORTH CAROLINA

Department of Justice

Raleigh, North Carolina

November 1, 1974

I, James H. Carson, Jr., Attorney General of North Carolina, do hereby certify that the foregoing 1974 Cumulative Supplement to the General Statutes of North Carolina was prepared and published by the Michie Company under the supervision of the Division of Legislative Drafting and Codification of Statutes of the Department of Justice of the State of North Carolina.

James H. Carson, Jr.
Attorney General of North Carolina

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1975

RATIFIED BILL

CHAPTER 635

HOUSE BILL 857

AN ACT TO FURTHER DEFINE THE RIGHTS OF HANDICAPPED PERSONS.

The General Assembly of North Carolina enacts:

Section 1. Chapter 168 of the General Statutes is hereby amended by adding to the end thereof a new section which shall be designated as G.S. 168-9 and which shall read as follows:

"§ 168-9. Rights to housing.--Each handicapped citizen shall have the same right as any other citizen to live and reside in residential communities, homes, and group homes, and no person or group of persons, including governmental bodies or political subdivisions of the State, shall be permitted, or have the authority, to prevent any handicapped citizen, of the basis of his or her handicap, from living and residing in residential communities, homes, on the same basis and conditions as any other citizen. Nothing herein shall be construed to conflict with provisions of Chapter 122 of the General Statutes."

Section 2. This act shall become effective upon ratification.

In the General Assembly read three times and ratified, this the 17th day of June, 1975.

JAMES B. HUNT, JR.

James B. Hunt, Jr.

President of the Senate

JAMES C. GREEN, SR.

James C. Green, Sr.

Speaker of the House of Representatives

ADAP INFORMATION CHECKLIST

This checklist has been designed to enable ADAP staff and others to identify various aspects of a specific ADAP. Items in the checklist are derived from North Carolina ADAP Standards and other documents.

To complete the questionnaire, several persons may have to contribute information. Most items require a "Yes" or "No"; no items should be skipped unless the parenthesized statement instructs the respondent to skip items. Several items are open-ended to the extent that numbers, explanations, or lists are also requested depending on whether a "Yes" or "No" is circled. Write N/A when the item is skipped or not applicable to your ADAP. In the event that lengthy answers are required, feel free to use the bottom or other side of the page.

This checklist alone should not be considered an evaluation nor standards review, but the information compiled would greatly facilitate either. Thus, prior to a program review, it would be helpful to complete this checklist as well as providing the program review team the following information: written program descriptions; manual of operations; policy statements (i.e., medication, emergency medical, human rights and safety policies); organizational charts; Constitution and By-Laws; client handbook; job descriptions; daily activity schedule; and forms (i.e., goal planning, monthly progress report forms, etc.).

ADULT DEVELOPMENTAL ACTIVITY PROGRAM

GENERAL INFORMATION

Date Checklist Completed: _____ Review Date: _____

1. Program: _____

Address: _____
(Street or Route)

_____
(City) (County) (State) (Zip)

Telephone: _____
(Area Code)

Capacity of ADAP Program: _____ Actual number of clients currently enrolled in the Program: _____

No. Title XX Clients: _____ No. Mental Health Clients: _____

Area Mental Health Program: _____

Address: _____

Area Mental Health Center Contact Person: _____

2. Program Director: _____

ADAP Director or Coordinator: _____

Address (only if different from above satellite): _____

_____

3. Interviewer(s): _____

4. Interviewee(s): _____

5. Others in attendance: _____

_____

_____

6. Other sources of funding (list):_____

_____

_____

_____

_____

7. Brief history of program:_____

_____

_____

_____

_____

8. Briefly describe client population (actual range of retardation and physical disability):_____

_____

_____

_____

_____

9. Area Served (catchment area - city, county, etc.):_____

_____

10. Estimated population of:

town_____

county_____

Using the time schedule below, briefly describe a typical day for an average ADAP Client in your program.

8:00

9:00

10:00

11:00

12:00

1:00

2:00

3:00

4:00

BOARD

Type (circle one): Private Non-Profit
Public Non-Profit

	TITLE	AGENCY REPRESENTED
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

THE STANDARDS

A. Organization and Administration Standards

Yes No Standard 1. The ADAP is operated by a community mental health center.

(If no, go to Standard 2.)

If it has an advisory board:

Yes No Factor 1: The advisory board has a constitution and bylaws.

Factor 2: The advisory board:

Yes No a. reviews regular reports from the ADAP;

Yes No b. maintains minutes of each meeting, copies of which are shared with the mental health center;

Yes No c. visits the ADAP to observe the program in operation.

Yes No Factor 3: The advisory board meets at least quarterly.

Yes No Factor 4: The advisory board has a chairperson.

Yes No Factor 5: The advisory board membership was approved by the local mental health authority upon recommendation of the ADAP director.

Yes No Factor 6: The advisory board participates in the annual ADAP evaluation.

Yes No Factor 7: The advisory board consists of at least five members representing a broad spectrum of the community.

Yes No Standard 2. The ADAP is operated by a private non-profit corporation. (If no, go to Standard 3)

Yes No It is legally constituted under the provision of the North Carolina Non-Profit Corporation Act.

Factor 1: The articles of incorporation, bylaws, or constitution:

Yes No a. describe the purpose for which the corporation is organized;

Yes No b. provide a governing body;

Yes No c. describe membership for the governing body;

Yes No d. describe procedure for selection and tenure of and removal from office of members of the governing body;

Yes No e. describe the responsibility and duties of each officer;

Yes No f. describe method of amending the bylaws;

Yes No g. describe provision of assets should the corporation dissolve; and

Yes No h. provide that the governing body be responsible for the formulation and implementation of overall policy.

Yes No Factor 2: The membership of the governing body of a non-profit corporation is broadly representative of the community.

Yes No Factor 3: The membership meets at least quarterly.

What is the frequency of other contact?

_____

_____

Yes No Factor 4: Members serve without pay.

Yes No Factor 5: No financial benefit or conflicts of interest arise as a result of membership on the governing body.

Yes No Factor 6: Minutes of all official meetings are maintained.

Yes No Factor 7: An annual evaluation of the ADAP is conducted.

_____Internal (self-eval) - last date?_____

_____External (imposed) - last date?_____

Yes No Factor 8: The governing body has a written policy regarding property, funds, management and operations.

Yes No Factor 9: The governing body has reviewed the program to check:

a. that an annual budget is prepared that adequately meets the needs of the program;

b. that accounting procedures are in accordance with generally accepted accounting procedure.

Example: Does the program have separate records (budget format) that identifies all income and expenditures for ADAP?

Yes No Standard 3. The ADAP is certified by a regional mental retardation specialist, Division of Mental Health Services.

Yes No Do you have a letter or certificate stating this from your regional specialist (new programs)?

Yes No Do you have a signed agreement with Area Mental Health and service provider (ADAP)?

Yes No Standard 4. A full-time coordinator of the ADAP has been designated.

Yes No This person's duties and responsibilities are clearly defined in writing.

Yes No Factor 1: The full-time ADAP director or coordinator has a college degree and one year of experience in mental retardation programming.

List educational level and years of experience in mental retardation.

_____

_____

Yes No Factor 2: The ADAP director's or coordinator's position carries responsibility and the authority necessary to achieve and maintain compliance with ADAP standards.

If no, state why._____

_____

To what extent is ADAP Coordinator involved in planning process of ADAP and/or total program?

_____

_____

_____

What input has ADAP Coordinator had in developing budget?_____

_____

Yes No Factor 3: The ADAP coordinator or director is authorized, with client involvement, to place clients in workstations or activity areas in order to carry out the program plans.

Yes No Standard 5. The ADAP has a Manual of Personnel Policies and Procedures. (Sample outline on page 99)

Yes No Factor 1: The manual contains information dealing with conditions of employment, position classification, job description, promotion opportunities, fringe benefits, sick and vacation leave, workmen's compensation, a personnel grievance system, and severance procedures. (also, hospitalization, retirement, unemployment insurance)

Yes No Factor 2: Each employee has a copy of the manual.

Yes No Each employee has access to a copy of the manual

Yes No Standard 6. A personnel record is maintained for each employee which includes job applications, references and other appropriate information.

Yes No Do you have employee evaluations?

How often?_____

Describe:_____

_____

_____

Yes No Standard 7. The ADAP has a staff orientation and an in-service training program.

STAFF ORIENTATION PROGRAM

Yes No a. Is there a written formal orientation? (Sample outline on page 102)

b. List items covered in the orientation.

_____

_____

_____

_____

STAFF DEVELOPMENT PORGRAM

Yes No a. Internal? list_____

_____professional literature?

_____films?

_____staff library?

Others? list_____

Yes No Professional consultations? Who? What?

_____

_____

Yes No Professional organizations? (list)

_____

_____

_____

Yes No Staff meetings?_____

How often?_____

Type of items covered in staff meeting?_____

_____

_____

b. External?

Have staff members been to training sessions in:

Yes No 1) Individual Goal Planning

Yes No 2) DDTI ADAP Training Program

Yes No 3) Other (list)_____

Are staff:

Yes No 1) allowed time off with pay to attend training

Yes No 2) reimbursed for tuition, books, etc.

Are staff required to:

Yes No 1) provide oral report on staff training recieved?

Yes No 2) take notes and prepare handout information for other staff on training topic?

Is there:

Yes No 1) separate training budget?
If yes, how much is alloted? $_____

Yes No 2) separate travel budget?
If yes, how much is alloted? $_____

Yes No 3) combined training and travel budget?
If yes, what % is alloted for training?
_____% How much? $_____

Standard 8. The Coordinator/Director of the A.D.A.P. observes sound business practices.

Yes No Factor 1: In bidding contracts, 100% of the cost including labor and overhead has been included in bid price. If program provides supplies, material, or tools they shall be added as a separate cost of bid price.

Yes No Do you bid at least 60% above labor cost?

How and where is this documented?_____

_____

_____

Yes No Are inflationary factors taken into account?

Yes No When possible, does program compare available sub-contracts and select those that are in best interest of client (i.e. training and payout)?

Yes No Factor 2: Wages paid to ADAP clients are on a piece rate or hourly commensurate wage.

How and where is this documented?_____

_____

_____

Yes No Do you use the form on page 190 of this manual?

What is the range of hourly rates paid to ADAP clients?_____

the average?_____

Yes No Factor 3: Persons whose earnings are more than half of minimum wage do not receive Mental Health/Title XX grant-in-aid subsidy.

What is the procedure for overseeing this?_____

_____

_____

Yes No Factor 4: Prices for products produced in the ADAP are equal to, or exceed, the cost of production (including commensurate wages, overhead, tools and materials).

List the prime manufactured products you produce:

_____

_____

_____

Yes No Factor 5: The ADAP has developed a system of quality control on manufactured and sub-contract goods. Describe:_____

_____

_____

Yes No Factor 6: Contract bidding practices, selling prices, and wage rates are reviewed at least annually by the staff and governing body.

Describe last review of this type (who, when, how):

_____

_____

_____

Standard 9. The ADAP complies with appropriate local, state, and federal laws and regulations.

Yes No Factor 1: (If utilizing sub-contract work or the manufacturing of goods to be sold) the ADAP has obtained from the U.S. Department of Labor Work Activities Center (WAC) certificate.

Yes No Factor 2: Compliance with Wage and Hour regulations are documented and available.

Yes No Factor 3: Each person involved in productive work receives a written statement for each pay period which indicates gross pay, hours worked and deductions.

Yes No Factor 4: Each person is paid at a rate equal to his productivity through either a piece rate or hourly wage system.

Yes No Factor 5: Work being performed away from the ADAP by clients meets all state and federal regulations relative to wages commensurate to that performed by a non-handicapped person doing the same job.

Yes No Is work performed outside of ADAP Center?

Yes No Are workers paid the minimum wage?

Yes No If minimum wage is not paid, are special worker certificates secured for the client?

Yes No Factor 6: (If containing a work component) ADAP complies with the Fair Labor Standards Act which prohibits minors between 16 and 18 years of age to operate hazardous equipment such as power driven woodworking machines.

Yes No Factor 7: (If using sub-contract or manufacturing work as a part of its program) ADAP has filed a waiver certificate (Form SS-15, 15A) as applicable with the Internal Revenue Service and pay Social Security on all clients whose earnings amount to $50.00 or more during a calendar quarter.

Yes No Factor 8: The facility complies with the Civil Rights Act of 1964 and appropriate laws, rules and regulations regarding civil rights.

Yes No Factor 9: The ADAP complies with OSHA (Occupational Safety Health Act) regulations.

Factor 10: All kitchen and cafeteria facilities are maintained in accordance with health standards and do not operate with a sanitation grade lower than "B".

Yes No Has local Health Department inspected kitchen and dining area?

Yes No A. Does program serve a hot meal?

1. Check which meal(s)
breakfast_____ lunch_____ dinner_____

Yes No 2. Are clients required to pay for meal?

Yes No 3. Is meal prepared on site?

Yes No 4. Is food service a training area for clients? ADAP clients?_____

Yes No B. Do clients bring their lunch?

If yes, where do they eat lunch_____

Yes No C. Do clients go "out to lunch" encouraging community integration?

Frequency of individual involvement?_____

_____

Size of group?_____

_____

Yes No D. Is there a designated break area (lounge, snack area, refreshment center)?

If yes, can client purchase snacks, etc.? Describe:_____

Yes No Are clients given opportunity for smoke break?

Where?_____

Yes No Factor 11: ADAP meets "privilege" and "use" license requirements as set forth by local and state tax authorities.

Yes No Are there vending machines in facility?

Yes No Standard 10. The ADAP has eliminated architectural barriers which prohibit access to the building and use of the equipment and facilities.

Yes No Factor 1: (If new) the ADAP structure complies with the Handicapped Section of the North Carolina Building Code.

Yes No Factor 2: (If already existing) the ADAP structure has no architectural barriers.

Yes No Standard 11. The ADAP has adequate space for classroom activities.

Yes No Is classroom large enough to accomodate instructor, students and supplies?

What is the average number of clients in class at one time?_____

Yes No Is classroom decor adult in nature?

Yes No Is curriculum as adult in content as possible?

Yes No Is the Progress Assessment Chart used as a curriculum guide?

Yes No Are community integration activities used to encourage practical application of studies?

List examples of community activities:

_____

_____

_____

Yes No Are clients assisted in setting up personal budget?

Yes No Are clients taught to use community banks?

Standard 12. The ADAP presents no risk to clients and staff and maintains the facilities in such a manner as to provide the best possible environmental conditions for the clients.

Yes No Factor 1: A safety committee comprised of staff members and client representatives has been appointed and meets on quarterly basis.

Yes No a. Minutes are kept on all meetings and submitted to the director with recommendations for needed changes.

Yes No b. A written plan has been established for the review of accident reports by the Safety Committee.

Yes No Factor 2: The ADAP is inspected and approved annually by a local fire authority with written documentation and follow-up on recommendations.

Yes No Factor 3: The ADAP is inspected annually by an outside safety consultant with written documentation and follow-up on recommendations.

Yes No Factor 4: There is an educational program for staff and clients which involves them in the principles of accident prevention and control of specific hazards.

If Yes, does this program include:

Yes No a. fire drill on a monthly basis;

Yes No b. an evacuation plan in compliance with local fire regulations; and

Yes No c. training for clients in personal safety habits including work and environment safety.

Yes No Factor 5: A first aid kit is available for the ADAP.

Yes No One or more staff members holds a certificate for successful completion of an approved first aid course.

Yes No Factor 6: The ADAP facility has a minimum of 60 sq. feet of activity space per client, (unless exceptions to said ratio are made by the appropriate authority.)

Yes No Factor 7: All hallways, doorways, entrances, ramps, steps and corridors are kept clean and unobstructed at all times.

Yes No Do you have a janitorial training program?

Yes No Factor 8: Provisions are made for proper fire, public liability, workmen's compensation, and fidelity bonding insurance coverage.

Is property (building & grounds):
_____owned by governing board;
_____leased or rented;
_____donated; Identify by whom_____

_____

Yes No Is insurance (all) reviewed by program annually?

Yes No Is building insured?
_____Contents within (equipment)
_____Sub-contract materials
_____Liability
_____Vehicles (liability & collision)

Yes No Standard 13. The ADAP has a written policy specifying the procedures to be followed in case of injury or medical emergency.

Yes No Factor 1: A formal plan is established for the reporting of all accidents that occur during ADAP activities, whether or not they give rise to injuries requiring medical treatment. The accident report contains, but is not limited to, the following information:

Yes No a. identification of person(s) involved;

Yes No b. place of accident;

Yes No c. time of accident;

Yes No d. name of responsible supervisor present;

Yes No e. circumstances under which accident occured, such as equipment in use at time, type of operation being performed, etc.;

Yes No f. description of first aid services given to any injured person; and where client sent or taken, time of departure from ADAP, and means of transportation used.

Yes No Factor 2: A plan for obtaining medical services, including emergency services, is documented with specific steps delineated.

Where is this documented?_____

Yes No Do all staff members have copy of procedure?

Yes No Factor 3: The ADAP has a designated physician or emergency room service available.

Who, Where?_____

Standard 14. The ADAP has written policy regarding medications administered at the ADAP facility.

Yes No Factor 1: The ADAP has a systematic training program to help each client become self-reliant regarding drug administration. If yes, briefly describe:_____

_____

_____

Yes No Factor 2: All medications are properly labelled.

Yes No Factor 3: All medications are stored in a safe and proper environment.

Factor 4: Proper documentation is written in the client's record identifying prescribed medication including:

Yes No a. current medication order with directions for use;

Yes No b. any known medication allergies; and

Yes No c. the clients ability to administer his own medication.

Standard 15. The ADAP has a written grievance policy and procedure whereby ADAP clients, their parents or guardians, may present their problem or grievance and obtain a prompt, fair settlement through an orderly process.

Factor 1: The grievance procedure includes the following steps:

Yes No a. discussions between the ADAP client and his immediate supervisor;

Yes No b. appeal to the ADAP director;

Yes No c. written documentation of problem and recommended action to be taken by parties involved;

Yes No d. appeal to the supervisor of the ADAP director; and

Yes No e. appeal to the governing body, i.e. board of directors of mental health center.

Yes No Does program have an in-house grievance committee?
Yes No If yes, is there client representation?

Where is the grievance procedure documented?

_____

Yes No Does program have Human Rights Committee?
Yes No If yes, is there client representation?

Yes No Factor 2: The grievance procedure is explained to the ADAP client and his parent or guardian during the intake orientation.

Standard 16. The ADAP makes all reasonable efforts to ensure protection of the legal rights of clients.

Yes No Factor 1: Clients and staff are educated about the rights of mentally retarded adults as full citizens of the United States through:

a. Reading Material? (list)_____

_____

_____

b. Special Programs (such as:)
____Voting
____Driving
____Benefits (SSI, Medicaid, Food Stamps, Family Planning, etc.)
____Prepaid Legal Services

Yes No c. Are clients involved in planning activities for program?

Yes No Factor 2: Clients are counseled concerning their rights and responsibilities as participants in the program in areas such as wages, hours, working conditions, social security, redress for injury, and the consequences of his/her tortious (wrongful act) unethical conduct.

Yes No Does this information also appear in client handbook?

Yes No Factor 3: The ADAP obtains legal representation for the client when the client has been wronged or has committed a crime or violated the legal rights of another.

List examples in past 6 months:_____

_____

Yes No Have you used Office for Children Legal Aid services-advocacy?

Standard 17. This ADAP makes every effort to see that the transportation needs of every client are met.

Yes No Factor 1: Clients involved in the ADAP are encouraged to use public transportation if available.

Yes No (If Yes) Public transportation is used by the client.

Factor 2: If the ADAP provides transportation

Yes No a. each person transported has a seat;

Yes No b. no more than one hour of driving time one way is permitted for each person;
If no, state why_____

_____

Yes No c. adequate and safe facilities are provided for the boarding and discharging of persons;

Yes No d. persons in a vehicle are protected by liability insurance;

Yes No e. a qualified and responsible driver meeting Department of Motor Vehicles and insurance agency requirements are employed or designated; and

Yes No f. any person transporting clients has a chauffeur's license.

Yes No Is vehicle(s) equipped to serve clients with mobility problems (wheelchair, walker, etc.)

VANS

Number of vans: _____
How obtained: _____
Capacity: _____
Source of funds: _____
_____
Number of drivers: _____

Yes No Are your vans free of labels or other stigmatizing symbols?

Yes No Does anyone other than ADAP clients ride van?
Who, why, how often? _____

_____

_____

_____

Yes No Does this make trip longer for ADAP clients?

Yes No Standard 18. The ADAP is reviewed annually by appropriate staff within the Department of Human Resources.

Who? When in past year? _____ _____

_____

_____

_____

Yes No Did you get written feedback from this review?

B. General Service Standards

Yes No Standard 19. The purpose and objectives of ADAP are set forth in writing.

Where? _____

List examples of how this program is meeting these required objectives:

a. to provide remedial care and therapeutic activities; ___

_____

_____

b. to involve the family and/or sponsoring agency in the program when possible;_____

_____

Yes No Are family/guardian counseling services available?

c. to provide an opportunity for personal enrichment;_____

_____

_____

d. to provide an opportunity for personal time activities;

_____

_____

e. to enhance persoral and social adjustment;_____

_____

Yes No Do clients have opportunity for self-initiated social contacts?

Yes No Does program provide for individual counseling.
If yes, how often?_____
By whom?_____
(Title)

Yes No Program provides for guided group discussion.
If yes, how often?_____
By whom?_____
(Title)

f. to develop community living skills such as mobility, personal safety, shopping, eating in public, communication, self-care, self-direction, etc;_____

_____

_____

Yes No Are clients provided age appropriate activities in small groups?

Yes No Do clients have opportunity to take part in community activities with non-disabled persons involving various social situations?

g. to develop pre-vocational skills such as manual dexterity, attention to tasks, care of tools and materials, acceptance of supervision, occupational exploration, etc.; and_____

_____

_____

Yes No Is client trained in outdoor chores:
Yes No care of lawn, flowers, shrubs?
Yes No gardening?

h. to provide an opportunity to move from ADAP to other programs oriented towards higher levels of individual functioning, including social and work skills._____

_____

_____

_____

Standard 20. The activities and services of the ADAP are set forth in writing. Where? (Client handbook?)_____

List any innovative projects or programs in which you have been involved:_____

_____

_____

_____

Yes No Standard 21. The ADAP has an admission committee.

Factor 1: The admission committee consists of;

Minimum

Yes No a. the program director, coordinator

Yes No b. evaluator

Additional

Yes No c. sponsoring agency(s) representative

Yes No d. V R counselor

Yes No e. interagency council representative and

Yes No f. other appropriate persons

List others:_____

_____

Yes No Clients, parents and/or guardian receive a pre and post admission consultation.

Individuals are referred to program by:

Yes No 1. individual

Yes No 2. relative

Yes No 3. neighbor

Yes No 4. professional person

Yes No 5. agency (list)_____

Yes No 6. inter-agency council

Yes No 7. other (list)_____

Yes No Are all referred person screened by Division of Vocational Rehabilitation?

Yes No Are all referrals accepted for evaluation?

Yes No Is there written documentation from the Vocational Rehabilitation Counselor recommending placement in the ADAP?

Yes No Is this recommendation documented annually?

Yes No Do you have representation on the interagency council

Yes No Do you have a waiting list? If yes, how many referrals are on this list and why?_____

_____

Yes No Are all clients certified by the area Mental Retardation Specialist.

Yes No Are persons provided referral service to other resources (public/private agencies, etc.) should person not be eligible for ADAP?

Yes No Factor 2: The admission committee meets for a pre-admission staffing regarding each person that is considered for admission.

Yes No Factor 3: A general medical, psychological, and social history is available at the pre-admission staffing

Yes No Factor 4: The pre-admission staffing report is documented in the client's file.

Yes No Standard 22. The ADAP has a client handbook which includes information that the client should know about the program.

Yes No Factor 1: The client handbook is written in a manner comprehensible to the client.

Yes No Is the client handbook adult in presentation?

Yes No Is the handbook professionally printed?

Yes No Factor 2: Each client is given a handbook.

Yes No Factor 3: Contents of handbook have been reviewed with the client.

Yes No Standard 23. The ADAP operates at least six (6) hours per day, five (5) days per week. If not, why?_____

_____

Yes No Standard 24. There is at least one staff member to each ten (10) or fewer clients.

Yes No Factor 1: ADAP specifies in writing how each member of the staff counted in staff/client ratio is involved in providing services to ADAP clients.

Yes No Factor 2: Duties and responsibilities of staff are clearly defined in writing.

Yes No Does each staff have copy of his/her job description?

List the staff persons who work directly with ADAP clients:

	Staff Name	Position	% of time, ADAP	Source of funding
1.				
2.				
3.				
4.				
5.				
6.				
7.				

Yes No Does program use volunteers?
How many?_____

Yes No Are they provided orientation?
What is their role?
Describe:_____

_____

Yes No Does program use student interns, work study placements, etc.?

List any research projects (past, present, future)_____

_____

Yes No Standard 25. The ADAP has written provisions outlining criteria by which a client moves from ADAP to another level of service.

Internal movement? (Describe)_____

_____

External movement? (Describe)_____

_____

Yes No Is client informed of movement criteria?

In the past year, how many clients have moved from ADAP to:

Extended (Sheltered) Employment?_____

Work Adjustment Services?_____

Competitive Employment?_____

Other (specify)?_____

Yes No Standard 26. The ADAP documents all discharges or suspensions from the program.

Yes No Factor 1: Reasons for discharge and the service to which the client was referred are included in the discharge summary.

Yes No Factor 2: The following criteria and procedure for discharge from ADAP are adhered to:

a. Discharge has been the result of routine staffing processes and/or the result of annual assessment as outlined in the procedure described in Standard 20, Factor 3, item c, d, and e.; or

b. if it has been found that an alternative program or placement is deemed more appropriate to meet the needs of the client; or

c. if it has been found that a person has behavior judged to be potentially harmful to other persons, this may constitute grounds for dismissal.

Yes No Factor 3: Suspensions have been for a specified time and reported to the appropriate sponsoring agency(s).

Yes No All suspensions have been for less than one week. If no, list any suspensions for longer period in past year._____

_____

Yes No Is there evidence in file that client was involved in relevant goal planning or contract before being suspended?

Yes No Does the program have a set of program rules?

Yes No If yes, are clients involved in the planning and rule information?

Yes No Are consequences known if certain rules are not followed?

Yes No Are persons provided referral service to other resources (public/private agencies, etc.) upon discharge or suspension if indicated?

C. Evaluation Standards

Standard 27. ADAP has an on-going client evaluation program outlined in writing and stating the purposes and techniques.

Where is this program outlined in writing?_____

Yes No Factor 1: ADAP operating within a sheltered workshop, meets the requirements and standards established in the Norms for Sheltered Workshops Affiliated With and Utilized by the North Carolina Division of Vocational Rehabilitation Services.

a. Does evaluation program meet Level I or Level II of VR NORMS?_____

b. Does ADAP rely on another certified ADAP for client evaluation service?_____
If yes, identify_____

NOTE: If ADAP answers yes to this question, ADAP need not meet other factors of this standard.

Yes No Factor 2: Each individual referred to the ADAP receives evaluation services. In the event that the client has completed an evaluation program at another institution or sheltered workshop within the last year, a copy of the facility's evaluation report substituted.

Yes No Factor 3: Does program rely on other resources or agencies for assistance with evaluation?
If yes, identify_____

Yes No Factor 4: The ADAP has a separate room available for the evaluator to do testing, counseling, report writing and holding client-staff meetings.

Yes No Factor 5: Each evaluator has no more than ten (10) clients enrolled in the evaluation program at one time.

Yes No Factor 6: One staff person in the ADAP is designated as the evaluator of the program.

Yes No Factor 7: The evaluator has at least a high school diploma and has completed an in-service training program in vocational evaluation.

Educational background:_____

In-service Training (where, when and length of training).____

_____

Yes No Factor 8: A written evaluation report is in each client's file.

Factor 9: The ADAP evaluation report consists of the following information:

Yes No a. a short summary of the client's background, intellectual functioning, medical history, and reason for referral to the program;

Yes No b. present social environment and family situation;

Yes No c. a list of specific physical, educational, training, social and personal activities;

Yes No d. observations of the individual's work habits and social interactions;

Yes No e. interpretation of instrument results;

List all instruments used:_____

_____

_____

_____

_____

NOTE: The Progress Assessment Chart is the preferred instrument for ADAP.

Yes No f. a summary outlining the client's progress, strengths, weaknesses, and potential growth; and

Yes No g. a recommended plan (Sample on page 171)

Yes No Factor 10: Reports of staffings, relative to client, indicating the date of the meetings, participants, subjects discussed and the results of the meeting are in the client's file.

Yes No Factor 11: Needed service not available in the ADAP are provided by other agencies or resources as indicated by evaluation.

Yes No Factor 12: Clients are referred to generic and specialized services appropriate to meeting their medical, social and educational needs. List examples in past 6 months:_____

_____

Yes No Factor 13: The evaluation report is completed and in the client's file within 60 days after admission into the ADAP. If not, why?_____

_____

Yes No Factor 14: An annual re-evaluation has been done for each client. It consists of:

Yes No a. a general written summary of the client's yearly progress to date, correlated with recommended plan in evaluation report;

Yes No b. subjective instruments correlated with the original as needed; and

Yes No c. individual goal plans including methods, techniques and community resources utilized toward achieving the goals.

Yes No Factor 15: A copy of the re-evaluation report appears in the client's file.

D. Individual Program Plan Standards

Yes No Standard 28. An individual program plan has been developed for all persons.

Yes No Factor 1: The individual plans conform to Scott and Houts' "Individual Goal Planning for Developmentally Disabled Persons" model as endorsed by North Carolina Division of Mental Health Services.

Factor 2: The individual plan includes the four major points of goal planning:

Yes No a. an assessment of what the person can do;

Yes No b. the use of small goals to reach larger goals;

Yes No c. a statement of who will do what and when; and

Yes No d. involvement of the person from the beginning.

Yes No Factor 3: The ADAP has a standardized form for individual goal plans.

Yes No Factor 4: Client records indicate a monthly review of the goal plan.

Yes No Factor 5: Goal plans are developed with the instructor, the client and related staff.

E. Record and Report Standards

Yes No Standard 29. The ADAP maintains a separate record on each ADAP client.

Factor 1: Each record maintains the following information and/or reports in individual client files:

Yes No a. referral and intake information

Yes No b. medical

Yes No c. psychological

Yes No d. social history

Yes No e. release of information

Yes No f. evaluation report and recommended plan

Yes No g. rating forms and profiles (i.e. PAC)

Yes No h. individual goal plans

Yes No i. monthly goal plan reviews

Yes No j. annual re-evaluations

Yes No k. semi-annual client progress report

Yes No l. conference notes

Yes No m. documentation of agency referrals, etc.

Yes No n. documentation of accident, attendance productivity and wages

Yes No o. discharge summary

NOTE: Some of the required information can be combined on the same forms.

Yes No Factor 2: All reports are dated and signed by responsible staff persons.

Yes No Is information in files arranged efficiently, neatly and in order according to date of entry? If other method of organization is used, describe:

_____

_____

_____

Yes No Is emergency information (doctor, medication, allergies, etc.) readily accessible?

Yes No Are forms professionally printed?

Yes No Are forms color-coded or otherwise tagged for easy reference in file?

Yes No Is all filed information secured in folder rather than loose?

Yes No Are all client file cabinets locked and kept confidential?

ADDITIONAL INFORMATION

Fill in the blanks with "yes" or "no" or other information as requested:

_____ 1. Client has freedom to make decisions (selection of food, type of work, recreation, etc.).

_____ 2. Client is assisted with written communication.

Describe _____

_____ 3. Client has space available to meet visitors, social worker, counselor, etc.

_____ Can he meet them in privacy?

_____ 4. Client has opportunity to spend own money.

_____ a. Are there nearby stores in community?

_____ b. Does program have store?

_____ c. Do clients select items sold in program store?

_____ d. Does he spend money and/or tokens?

_____ e. Is provided assistance in use of money when necessary.

Describe _____

_____ 5. Client has the use of a telephone.

_____ Can it be used in privacy?

_____ 6. Client participates in physical fitness activities when medical history permits and when appropriate.

_____ 7. Client's family, advocate and/or friend participates in certain program activities.

a. How often? _____

b. What type activities? _____

_____ 8. Clients are addressed as adults by the program staff, etc.

_____ 9. In so far as possible clients are provided the dignity of risks (opportunity to display independence or encourage self-determination).

_____ 10. Is close and systematic attention paid to the personal appearance of clients. List activities designed to improve/enhance the adult appearance of clients._____

_____

_____

_____ 11. Does staff refer to clients as adults, and in a dignifying manner?

_____ 12. Do you serve clients who have resided in state institutions in past 5 years. If so, how many?

_____ 13. How many clients do you serve in your program that otherwise would have been institutionalized?

BUILDING

_____ 14. Is building located near industrial and/or shopping district?

_____ 15. List community resources within 6 blocks of your location.

_____

_____

_____ 16. Is program title as innocuous and adult as possible?

_____ 17. Is program location normalizing for clients or located--

_____next to or near children's program?

_____in building whose history is associated with children (i.e. old school building)?

_____in church?

_____ 18. Since work is the activity that most adults are involved in during the day, does the building look as though work might be performed there?

_____ 19. Is interior design of building adult in nature?

PUBLIC RELATIONS

_____ 20. Local news media used:

_____ a. Newspaper

_____ b. Radio

_____ c. Television

_____ d. Other (please list)_____

_____ 21. Program has available resources for public presentation on program; by whom?_____

_____ 22. Program encourages visitors when they are not an invasion of client's privacy.

SAMPLE OUTLINE FOR AN A.D.A.P. CLIENT HANDBOOK

I. The Adult Developmental Activity Program

- A. Introduction - Program Purpose and Objectives
- B. Program Philosophy
- C. Program History
- D. Program Funding
- E. Program Certification

II. Programs and Services (include descriptions)

- A. Evaluation
- B. Referral Services
- C. Adult Basic Education
- D. Personal and Social Adjustment
- E. Work Activity
- F. Counseling
- G. Transportation Training
- H. Community Integration
- I. Recreation
- J. Other

III. Other Helping Agencies in the Community

IV. Admission Criteria

V. Client Conditions and Benefits

- A. Rules and Regulations
- B. Schedules
- C. Holidays
- D. Vacations
- E. Pay Periods
- F. Pay Rates and Deductions
- G. Benefits
- H. Grievance Policy
- I. Staff Names and Positions

SAMPLE JOB DESCRIPTION

POSITION: Evaluator, Adult Developmental Activity Program

SPECIFIC TASKS REQUIRED IN JOB:

Intake/Admission Duties

1. to interview prospective clients, provide information and tours of facilities to said clients

2. to submit the names of all referred clients to the Division of Vocational Rehabilitation for eligibility determination for DVR services

3. to obtain current medical and psychological information

4. to arrange for a Pre-Admission staffing of new clients and document such in client file

5. to provide orientation information and services to new clients and obtain necessary information from new clients. On the day that a new client enters program the Evaluator to:

   a. have client in office first thing in morning to fill out general information and travel sheet; and to explain brochure then give tour of facilities

   b. introduce client to Instructor(s)

   c. provide Instructors with appropriate forms including behavior observation forms

   d. assist new client with lunch arrangements

   e. forward Client information to typist with instructions to make file folders

   f. show Client where timeclock is; how to operate; and where his time card will be

6. to ensure that new clients meet ADAP Admission criteria (as stated in ADAP Standards)

Evaluation Duties

7. to prepare in writing the purposes and current techniques utilized in the evaluation program

8. to refer to and utilize generic resources to meet the individual needs of clients

9. to administer and interpret assessment instruments as necessary to identify and measure the client's strengths, weaknesses and potential growth of the client

10. to teach the client tasks and include in the evaluation report

    a. how the tasks were taught
    b. under what conditions
    c. how long it took to teach task
    d. how many errors
    e. how many trials were necessary until task was perfect
    f. how that person compared to others in the program and to outside population
    g. how he performed under various conditions: in work area, quiet room, group situation, harsh instructor
    h. then record production for at least an hour per day for 10 days
    i. and record how production improved; when and where leveled off

11. to observe the individuals' work habits and social interactions

12. to prepare a written evaluation report as outlined in ADAP Standards forwarding a copy to client's file and sponsoring agency if requested

13. to prepare a recommended plan (ADAP Adjustment Plan) which attempts to meet the clients' needs as identified during evaluation

14. to report the results of evaluation findings in staffing form to ADAP Coordinator

15. to attend all staff meetings regarding evaluation clients and document such in client file

16. to counsel with clients individually

17. to assist in the development of initial Individual Goal Plans

18. to ensure compliance with ADAP Standards regarding evaluation procedures

Re-evaluation Duties

19. to annually (at minimum) schedule and re-administer (or supervise the administration of) appropriate assessment tools

    a. correlating results with originals
    b. forwarding results to: ADAP Coordinator
       Client file
       Sponsoring agency (if requested)

20. to work cooperatively with ADAP Coordinator and Instructor in identifying yearly progress to date

SAMPLE JOB DESCRIPTION

POSITION: Instructor, Adult Developmental Activities

1. To implement and practice individual program plans for each ADAP Client optimizing opportunities for each person by

   a. meeting with ADAP Client (and Coordinator or Evaluator) to identify Client strengths and weaknesses
   b. meeting with ADAP Client (and Coordinator) to design and write goal plans to meet the needs of each ADAP Client
   c. carrying-out Individual Goal Plans
   d. documenting and/or charting progress of goal plans
   e. assisting in the initial evaluation and annual re-evaluation of clients by cooperatively working with Coordinator and/or Evaluator
   f. utilizing precision instruction techniques in training efforts (demonstrating, physically assisting, cueing, and reinforcing)

2. To develop community living skills and social competence by

   a. observing and recording skills as required to complete the Progress Assessment Chart (PAC)
   b. instructing individual or group sessions (as assigned by coordinator) designed to teach community living skills indicated in the four major areas (Socialization, Self-Help, Communication, Occupation) of the PAC. For example: sessions to teach mobility, safety, shopping, eating in public, personal hygiene, etc.
   c. participating and instructing community involvement activities in small client groups (2-3 persons). For example: swimming at city pool, shopping downtown, bowling, riding bus, taxi, etc.

3. To provide opportunity for personal enrichment and enhance the personal and social adjustment of each client by

   a. maintaining adult norms and expectations
   b. supporting the "dignity of risk"
   c. encouraging peer relationships
   d. building in opportunities for clients to make choices
   e. referring clients to programmed activities as appropriate
   f. regarding client as a person - an individual in his own right - a citizen with legal rights
   g. encouraging independence in decision making, traveling, recreational pursuits and peer relationships
   h. providing counseling sessions as appropriate an/or indicated on Individual Goal Plan or ADAP Adjustment Plan

4. To provide training and instruction in leisure time activities by

   a. taking breaks with and modeling appropriate behavior during breaks and lunch periods
   b. participating in regularly scheduled (small group) night-time recreational training activities. This may also include overnight trips to beach, mountains, etc.
   c. participating in scheduled social activities during regular hours

5. To provide remedial care and therapeutic activities when indicated in Individual Goal Plan or by ADAP Adjustment Plan by

   a. providing the assistance and training necessary for medically involved mentally retarded or physically disabled adults to participate in program if at all possible
   b. carefully fostering the dignity of clients receiving this care
   c. carrying out physical therapy as prescribed by physical therapist, if necessary

6. To participate in conferences (i.e. family, parents, sponsoring agency) and client staffings as appropriate

7. To assist ADAP Client in meeting the criteria necessary to move from ADAP to other programs such as the sheltered workshop by

   a. expecting and rewarding improvement and "normal" behavior
   b. imposing rules and regulations as similar as possible to those of "the real world."
   c. instructing and supervising clients in work activity at the complexity and duration of which he/she is capable.
   d. training clients in good work habits
   e. utilizing behavior shaping techniques as prescrived in Individual Goal Plans

8. To develop pre-vocational skills such as manual dexterity, attention to tasks, care of tools and materials, acceptance of supervision, occupational exploration, etc., by

   a. setting up work schedules
   b. instructing and supervising clients in various sub-contract work
   c. teaching clients how to check work for accuracy
   d. maintaining quality control
   e. ordering necessary supplies
   f. supervising the maintenance of equipment and inventory

9. To document services rendered and record progress as achieved by each client by maintaining the following individual records:

   a. behavior observation reports
   b. Progress Assessment Chart
   c. Individual Goal Plans
   d. monthly Goal Plan Reviews
   e. injury reports
   f. attendance records
   g. productivity and wage records
   h. client daily schedule (calendar) forms

10. To provide minor first aid if necessary

SAMPLE JOB DESCRIPTION

POSITION: Adult Basic Education, Instructor

SPECIFIC TASKS REQUIRED IN POSITION:

1. to assess (or obtain assessment of) client abilities before instruction, at various intermediate-stages, and at the end of direct instruction
2. to identify specific behavioral objectives
3. to design curriculum to meet the needs of the individuals enrolled in ABE classes
4. to make the selection of essential skills to be taught which will be of maximum use to the handicapped adult
5. to provide learning situations for practicing those skills which have not been properly developed
6. to encourage community integration/involvement in learning situations whenever possible (emphasizing small group training)
7. to utilize effective instructional materials and methodology
8. to ensure that the educational atmosphere maintain adult norms
9. to ensure that the decor of classroom maintains an adult image (alphabet, color charts, numbers should NOT be displayed on walls)
10. to adapt all instructional materials for adult use - children's themes must be removed from educational material before use
11. to select materials to be used in instruction
12. to observe and record skills as required to complete Progress Assessment Chart (PAC)
13. to build in opportunities for clients to make choices
14. to regard client as a person - an individual in his own right - a citizen with legal rights
15. to participate in conferences (i.e. family, parents, sponsoring agency) and/or Client staffings as appropriate
16. to notify responsible Instructor of class time and starting date and document same in file

COMMUNITY COLLEGES AND TECHNICAL INSTITUTES FEDERAL VOCATIONAL FUNDS FOR USE WITH DISADVANTED AND HANDICAPPED STUDENTS

The Federal Vocational Education Act of 1963 as amended in 1968, requires that an amount at least equal to 15% of the federal appropriation in this Act be used in meeting the educational needs of persons who are disadvantaged and that an amount equal to 10% of the same appropriation be used in meeting the educational needs of the physically and mentally handicapped persons.

The State Plan for Vocational Education qualifies persons with the following characteristics for special Vocational attention.

Disadvantaged	Handicapped
Economic Deprivation	Speech Handicaps
Cultural Deprivation	Hearing Handicaps
Educational Deprivation	Visual Handicaps
Social Maladjustment	Crippling Handicaps
Potential Dropout	Emotional Maladjustment
	Mentally Handicapped
	Other Health Handicaps

Some of the following workshop and ADAP staff salaries are supported in full or part of, by Community Colleges and Technical Institutes: Vocational Evaluators, Vocational Adjustment Coordinators, Personal and Social Adjustment Instructor, ABE Instructor and other instructors. Some Community Colleges and Technical Institutes provide physical facilities for ADAP.

To apply for participation in the Federal Vocational Funds for the Disadvantaged and Handicapped contact your nearest Community College or Technical Institute.

For further information write:

Director of Occupational Education
Department of Community College
Raleigh, North Carolina 27611
Telephone: (919) 829-3995

The Developmental Model

According to the Developmental Model, every person is capable of learning and change. Retarded children or adults are, first of all, people. They can develop physically. They can grow intellectually. They can adjust socially and gain emotional maturity. They may be slower than others, but they are always capable of development. We all develop continually.

All programs for retarded persons must meet the three basic criteria of the Developmental Model:

a. Contribute to increasing the complexity of the individual's behavior.

b. Contribute to increasing the individual's ability to control his environment.

c. Contribute to increasing the individual's self-control and maximizing those qualities which have been culturally designated as normal or human.

A natural consequence of the Developmental Model is the necessity to design all programs as parts of the continuum of service. A recognition and acceptance of the developmental and habilitation potential of every mentally retarded person requires that no program be viewed as terminal or permanent.

Every program should be part of an incremental habilitation plan geared to the needs of the individual. For each rung of the developmental ladder, there must be another rung for the developing person to reach out and strive for.

From
The Right to Choose
National Association for Retarded Citizens

SAMPLE

MOVEMENT CRITERIA

When ADAP Client meets one or more of the following conditions, he should be considered for referral to programs oriented towards higher levels of individual functioning:

1. produces half of what is competitively acceptable
2. earns half minimum wage per hour
3. requires only normal supervision in order to be productive
4. requires little or few services/programs other than work activity
5. scores within short-term training on MacDonald Vocational Capacity Scale

Evaluator/Coordinator to have contact names and working relationships with VR Counselors, VR facilities, sheltered workshops, etc., in the area and/or region so that the referral process can take place.

Progress Assessment Charts

P.A.C.

ORDER FORM

BILL TO: _____ SHIP TO: _____

_____ _____

_____ _____

ITEM	NO. SETS	COST
ASSESSMENT CHARTS:		
P-P-A-C (6th Edition) @ $4.80 per set of 25 forms		
P-A-C-1 (12th Edition) @ $5.75 per set of 25 forms		
P-A-C-1A (1st Edition) @ $4.80 per set of 25 forms		
P-A-C-2 (10th Edition) @ $5.75 per set of 25 forms		
M/P-A-C-1 (1st Edition) @ $4.80 per set of 25 forms		
EVALUATION INDEXES:		
P-P-E-I (2nd Edition) @ $7.20 per set of 5 forms		
P-E-I-1 (4th Edition) @ $7.20 per set of 5 forms		
P-E-I-2A For Moderate (4th Edition) @ $7.20 per set of 5 forms		
P-E-I-2B For Mild (4th Edition) @ $7.20 per set of 5 forms		
P-E-I-2C For Borderline (4th Edition) @ $7.20 per set of 5 forms		
M-M/P-E-I-1 @ $7.20 per set of 5 forms		
M-F/P-E-I-1 @ $7.20 per set of 5 forms		
P-A-C Manual @ $7.50		
P A C Complete Specimen Set @ $19.50 per set		
CLIENT BOOKS:		
Clumsy Charlie (set of 4 books) @ $5.00 per set		
Out with Tom (set of 13 books) @ $15.60 per set		
Spotlight on Mystery (set of 4 books) @ $6.00 per set		
Talking Points @ $1.20 each		
PROFESSIONAL BOOKS AND ARTICLES:		
Social Competence & Mental Handicap @ $8.90 each		
Mental Handicap & Physical Environment @ $9.40 each		
An Evaluation of the Effects of Group Home Living @ $.55 each		
TOTAL ORDER		
SHIPPING AND HANDLING CHARGE (Orders less than $100.00 add $2.00) (Orders less than $200.00 add $3.00) (Orders less than $300.00 add $4.00)		
TOTAL DUE (Incl. Shipping & Handling Charge)		

MAIL ORDER AND PAYMENT TO:

AUX CHANDELLES, P-A-C DEPT. POST OFFICE BOX 398 BRISTOL, INDIANA 46507

C 7510-200R

SAMPLE

ADAP PLAN

Name_____

Date_____

Coordinator_____

Need Areas	Specific Objectives	Program/Services	Staff Responsible
Lack of Occupational skills	To work persistently for 30 minutes	Involve in work activity	Work Instructor
Lack of Academic Skills	To recognize numerals 1-12	Involve in Adult Basic Education classes	ABE Instructor
Lack of Social Skills	To order, eat and pay for meal in local restaurant	Refer to Community Lunch Program	ADAP Coordinator
Lack of Recreational skills	To independently go downtown to a movie with a friend	Involve in Community Recreation Program	ADAP Coordinator
Inappropriate Social Behavior	To come to work and downtown to a movie with a friend	Involve client and family in Individual Goal Planning	ADAP Coordinator
Lack of Dental care and the means to purchase	To apply for medicaide and make appointment with dentist for false teeth	Refer to Department of Social Services	ADAP Coordinator

(Note: This plan should serve as the basis for the annual re-evaluation.)

cc: Client
Instructor
Client File

INDIVIDUAL GOAL PLAN SAMPLES

NOTE: The following are not "model" plans but rather examples of acceptable goal plans in an A.D.A.P.

EXAMPLE FORM

Name

Present Behavior:

IN THIS SECTION DESCRIBE WHAT THE PERSON IS DOING NOW.

Goals	Projected Dates	Method
FOR EACH SMALL GOAL SAY WHAT THE PERSON WILL BE DOING WHEN THE GOAL IS REACHED. USE AS MANY STEPS AS YOU NEED. FINAL GOAL: EXPLAIN WHAT THE PERSON WILL EVENTUALLY DO AS A RESULT OF ACCOMPLISHING THE SMALLER GOALS.		FOR METHOD, SAY WHAT YOU WILL DO TO HELP THE PERSON REACH HIS/HER GOAL.

Instructor: Coordinator:

cc: Client
Instructor
Client File

INDIVIDUAL GOAL PLAN

NAME: John Carter DATE:

PRESENT BEHAVIOR (INCLUDE STRENGTHS): John Carter is an attractive young man who has a hygiene problem. Social acceptance and interaction are hindered by this problem.

GOALS	DEADLINE	METHOD
1ST GOAL: Mr. Carter lists some reasons why good hygiene is important and beneficial.	Dec. 15	1ST GOAL: Instructor will counsel, discuss goal and supervise appropriate list.
2ND GOAL: Mr. Carter lists the facilities necessary for proper hygiene: bathtub, washing machine, mirror, sink, shampoo, deodorant, bath and laundry soap.		2ND GOAL: Same method as goal one.
3RD GOAL: Mr. Carter lists, visually identifies and approximates cost of toilet articles he will need to buy.		3RD GOAL: Through discussion, counseling and use of sample articles, instructor will teach and review list and cost of articles.
4TH GOAL: Mr. Carter verbally associates article with use and frequency of need.		4TH GOAL: After proper counseling Instructor will require Mr. Carter to review articles and frequency of use.
5TH GOAL: Mr. Carter buys the necessary toilet articles.		5TH GOAL: Instructor supervises shopping and purchasing of necessary articles.
6TH GOAL: Mr. Carter uses the articles on a set schedule.		6TH GOAL: Instructor assists in developing chart so schedule may be reinforced, reviewed and supervised.
FINAL GOAL: Mr. Carter independently carries out an adequate hygiene program.		FINAL GOAL: Will be accomplished when chart indicates that good hygiene has been internalized. (This will be determined when chart is 100% complete for four consecutive weeks.)

NAME: Andrea Jones DATE:

PRESENT BEHAVIOR (INCLUDE STRENGTHS): Ms. Andrea Jones is a friendly woman who regularly attends the ADAP. Her father picks her up around 2:30 each afternoon. He usually comes in and takes Ms. Jones by the hand as they leave. This appears inappropriate for a woman of her age.

GOALS	DEADLINE	METHOD
1ST GOAL: Ms. Jones leaves building and gets into her car when Instructor walks with her.	Oct. 30	1ST GOAL: Coordinator and Instructor will talk with Ms. Jones and her father about goal plan. The father will be encouraged to stay in his car and wait for Ms. Jones to come out at 2:30. At first, Ms. Jones may need some assistance, if so, Instructor will walk with Ms. Jones to her car. Father and Instructor to verbally praise Ms. Jones when she gets into the car.
2ND GOAL: Ms. Jones leaves building and gets into her car when verbally reminded and encouraged by her Instructor.		2ND GOAL: Instructor to physically and verbally point out window when father drives up in car and when she leaves building.
3RD GOAL: Ms. Jones leaves building and gets into car when she sees her father drive up with only the cue of Instructor pointing out window.		3RD GOAL: Same as #2 except Instructor only briefly points out window when father drives up. Verbal praise is faded as Ms. Jones gains independence in task.
FINAL GOAL: Ms. Jones leaves building and gets into her car when she sees her father drive up.		

NAME: Ms. Janet Black DATE:

PRESENT BEHAVIOR (INCLUDE STRENGTHS): Ms. Janet Black is an attractive, well-dressed young woman who comes to work crying almost every morning (although she rarely crys at other times during the day). She often manages to speak with several different instructors before she calms down enough to work.

GOALS	DEADLINE	METHOD
		Instructor meets with Janet to discuss her inappropriate behavior of crying. Instructor explains that crying while at work is not appropriate for an adult and keeps Janet from performing her job. Instructor to suggest that by concentrating on the new sub-contract work she has to do, Janet will be less likely to think about personal problems and cry. Janet usually gets much more attention (from several instructors) when she crys, which could be reinforcing the crying behavior. Janet likes attention from instructors and likes to talk with instructors about herself. Thus, instructors to ignore the crying but reward Janet for working without crying.
1ST GOAL: Janet works without crying one morning.	Dec. 1	1ST GOAL: Instructor to tell Janet "If you start work without crying, then you may talk for 5 minutes with any instructor you choose, but, if you cry, no instructor will talk with you." Since Janet may try to "test" instructors to see if they will do what they say, the crying may increase temporarily. Instructors are to ignore this behavior. Rather than appearing to ignore deliberately, instructor(s) should just appear to be more involved with clients who are working well. To shape Janet's working behavior, instructor to praise Janet every morning she begins work without crying. Instructor to also provide reward (5 minute conversation) each morning she begins work without crying.
2ND GOAL: Janet works two consecutive mornings without crying.		2ND GOAL: Procedure same as Goal #1 except instructor to help Janet graph the number of days each week she starts work without crying. This should help Janet see how she is improving.
3RD GOAL: Janet works three consecutive mornings without crying.		3RD GOAL: Same as Goal #2 but instructor to begin fading praise and provide reward when goal is met.
4TH GOAL: Janet works five consecutive mornings without crying.		4TH GOAL: Same as #3
FINAL GOAL: Janet works for five consecutive mornings without crying.		FINAL GOAL: When final goal is met, Janet may go out to lunch in nearby cafe with favorite instructor.

GOAL PLANNING WITH DEVELOPMENTALLY DISABLED PERSONS

Order From: Pennsylvania State University
Continuing Education Stores
Room 7
J. Orvis Keller Building
University Park, Pennsylvania 16802

Price: $3.25

NOTE: May be reproduced.

This is a revision of the workbook entitled "Goal Planning with the Mentally Retarded." Procedures and basic strategies for developing an individualized client plan are given.

GOAL PLANNING
INSTRUCTIONAL MATERIALS

REVISED RATE STRUCTURE

1. Video Tape Workshops for training mental health staff in groups of 4 to 8, in use of goal planning principles with their patients. Six, two-hour workshops are guided by video tape. Video presentations explain concepts and structure group discussions. Most of the workshop time is spent with participants working on their own cases. An associate instructor, who is physically present, guides the group discussion, hands out materials and runs the video equipment.

   a. Goal Planning in Mental Health Rehabilitation Workbooks*
   (Looseleaf workbook for participants--each participant should have a copy. Copies can be re-used by replacing pages where participants write their goal plans. Agencies may insert their own forms in place of practice forms provided for writing goal plans.)

   Single copies.....$5.00ea.
   2-24 copies..... 4.00ea.
   25-or more copies..... 3.50ea.

   *Includes 1 copy of What Will Therapy Do For Me, Goal Planning Strategies for Problem Behaviors and Take A Small Giant Step which are used as part of the course.

   Replacement Sets
   Workbooks can be re-used by replacing pages where participants write exercises and goal plans.
   Replacement sets include exercise sheets, forms and certificates of course completion.

   1 set.....$1.00
   8 sets..... 4.00
   100 sets.....30.00

   b. Video tape: Sixty minutes of video tape are required for the twelve hours of workshop. An associate instructor's manual accompanies every tape. Copies are available in ½", 1" and 3/4" cassette formats. When purchasing workbooks from the Mental Health Materials Center, customers can also send a blank 60 minute video tape to Dr. Peter S. Houts, Department of Behavioral Science, M.S. Hershey Medical Center, Hershey, Pa. The workshops will be copied onto this tape at no cost.

2. The following training booklets are available separately:

   a. Take A Small Giant Step* (a booklet for use by patients with space for writing their own goal plans)
   Guidelines for introducing Take A Small Giant Step to patients (a short handbook for staff)

b. What Will Therapy Do For Me* (a booklet discussing why goal planning is needed in mental health)

c. Goal Planning Strategies for Problem Behaviors* (a booklet explaining how to set goals with difficult clients)

These booklets are available at the following rates:

1	9 copies	$ .50ea.
10	24 copies	.40ea.
25	99 copies	.35ea.
100	999 copies	.30ea.
1,000	4,999 copies	.25ea. (1)
5,000	9,000 copies	.20ea. (1)
10,000	or more copies	.18ea. (2)

(1) Imprint of distributing agency may be arranged on outside back cover at additional cost of $5.00 per 100 copies.

(2) Imprint of distributing agency may be arranged on outside back cover at no additional cost.

*One copy also provided, at no extra charge, with each workbook ordered.

Orders amounting to less than $5.00 must be accompanied by remittance. When accompanied by remittance, postage and handling charges will be absorbed by publisher.

Address all inquiries and orders on above materials to:

Mental Health Materials Center
419 Park Avenue South
New York, New York 10016 Phone: (212) 889-[illegible]760

SAMPLE FORM

ADULT DEVELOPMENTAL ACTIVITY PROGRAM

Referral Form

Name:_____ Date:_____

Coordinator/Evaluator:_____

Check if documented in client files:

_____Referral to Division of Vocation Rehabilitation

_____DVR recommendation for ADAP placement

_____Certification by Area MR Specialist

_____Title XX Certification

_____Diagnosis of substantial mental retardation

_____Diagnosis of severe physical disability

List any DVR services previously purchased:

1.

2.

3.

Why is this person not being considered for competitive employment?

Why is this person not being hired as a sheltered employee?

GENERAL INFORMATION SHEET

Ideally, most of this information should be secured by Evaluator before the Pre-Admission Staffing. This form or sheet can be arranged in any manner but should include the following information:

Client's full name
address (including county and zip code)
telephone number
date of birth, age, sex, race, weight, height
marital status
social security number

Date of application and enrollment

Referral agent

Reason for referral

Emergency contact name and telephone number

Other agencies working with referred person

Physician

Medication: type, dosage, reason for taking, schedule, etc.

Mother's name, address, telephone number, occupation

Father's name, address, telephone number, occupation

Spouse's name, address, telephone number, occupation

Educational background

Employment background

Disability diagnosis

Description of disability

Transportation arrangements

Additional information

SAMPLE FORM

ORIENTATION

Name_____ Date_____

I. Brief Interview After Tour of the ADAP.

A. Client's feelings about the workshop and being evaluated by the ADAP.

_____

_____

_____

_____

_____

_____

B. Will there be a problem with transportation? Yes_____ No_____

If yes, why:_____

_____

_____

C. Does the client object to the ADAP contacting his parents or surrogates concerning his participation in workshop activities?

Yes_____ No_____ If yes, why:_____

_____

_____

II. Tour Orientation (Check areas shown): working areas_____ evaluation area_____

restrooms_____ eating & break areas_____ time clock_____ classroom_____

office & counseling areas_____

A. Were safety policies explained? Yes_____ No_____ If no, why not:

_____

_____

B. Were ADAP activities that client is to participate in & reason why explained? Yes_____ No_____ If no, why not:_____

C. Was hand-book given to client and goals and functions of the ADAP explained? Yes_____ No_____ If no, why not:_____

_____

SAMPLE FORM

CONSENT FORM FOR RELEASE OF CONSUMER INFORMATION

Facility being asked for information (name and address):

_____

_____

I, _____, hereby authorize the above-named facility to release specified information concerning me to:

(name and address of facility or person to which disclosure is to be made:)

_____

_____

This data shall include _____
(extent and nature of data to be disclosed)

_____

The purpose of releasing this data shall be _____

_____
(purpose or need for the disclosure)

I understand that I may revoke this consent at any time except to the extent that action based on this consent has been taken. This consent will expire automatically after 90 days from the date on which it is signed, unless it is a blanket release to an insurance company for hospitalization benefits or for research purposes.

This authorization and request is fully understood and is made voluntarily on my part:

Signed: _____

_____
(specify if signature is that of consumer, parent, or legal guardian)

Witness: _____

Date: _____

SAMPLE FORM

PRE-ADMISSION

STAFFING REPORT

Name _____ Date _____

Referring Agency _____

PARTICIPANTS:

VR Counselor _____ Co-ordinator _____

Evaluator _____ SS Caseworker _____

Instructor _____ Other _____

Check if Received: psychological report____ medical report____ social history____ R-4_____

others (list)_____

INFORMATION REVIEWED: _____

_____

_____

_____

_____

_____

_____

_____

_____

PRESENT STATUS: _____

_____

RECOMMENDATIONS: _____

_____

_____

_____

_____

_____

_____

Acceptance Letter Sent _____ Release Form Sent _____

STAFFING REPORT

Name _____ Date _____

Referring Agency _____ Type Staffing _____

Participants:

V.R. Counselor _____ Co-ordinator _____

Evaluator _____ S.S. Caseworker _____

Instructor _____ Other _____

ANNUAL ADAP PLAN

NAME _____

DATE _____

COORDINATOR _____

Target Problems	Objectives	Program/Services	Staff Responsible

cc. Client
Instructor
Client File

Name:	Date:
Present Behavior:	

Goals	Projected Dates	Method

Instructor:	Coordinator:

cc: Client
Instructor
Client File

INDIVIDUAL GOAL PLAN

SAMPLE FORM

Name _____ Month _____

C= _____ Hr. Rate _____ Program Status _____ Labor Code _____

Day	Work Tasks	Production Samples		Non-Work Activities		Daily Comments
		Time	Amount	Time	Activities	

Individual Plan Progress Summary:

153

INSTRUCTOR: MONTHLY CALENDAR COORDINATOR

RATING FORM FOR MEASURING PRODUCTIVITY OF HANDICAPPED WORKER PAID AT HOURLY RATE

(Worker is to be rated at least once every 6 months)

Name of Worker		Job	
Period of Rating: From	Through	Date of Employment	Rater

HOW TO DETERMINE RATING

Enter for each factor below the numerical rating which reflects the handicapped worker's performance as compared with the performance that would be expected of an average nonhandicapped worker. The level for nonhandicapped workers should be considered as 100 percent.

Rating Groups		0 - 20%	21 - 40%	41 - 60%	61 - 80%	81 - 99%	100%
Factors Rated	Weight of Factor	Generally Unacceptable	Far Below Average Standards for Industry	Well Below Average Standards for Industry	Significantly Below Average Standards for Industry	Approaches Average Standards for Industry	Meets Average Standards for Industry
Quantity of	90%						
Quality of Work	10%						

COMPUTATION OF RATED WAGE

(A) .90* X Rating for **Quantity** of Work = _____

(B) .10* X Rating for **Quality** of Work = _____

(C) Total of (A) + (B) Above = _____

(D) Prevailing Industry Wage** for Job Rated = _____

(E) Product of (C) X (D) Above = _____ (Rated Wage)

*These figures are decimilized expressions of the weights 90% and 10% respectively.

**Prevailing Industry Wage is the hourly wage paid average nonhandicapped workers in industry in the vicinity for essentially the same type of work.

(Note: This form is recommended by the U. S. Labor Department.)

NORTH CAROLINA DEPARTMENT OF HUMAN RESOURCES
DIVISION OF SOCIAL SERVICES
ADULT DEVELOPMENTAL ACTIVITY PROGRAM CLIENT PROGRESS REPORT

CLIENT _____ DATE __/__/__

CLIENT ID NO. _____

PROGRAM ID NO. _____

	PRE-TEST	TREATMENT GOAL SET	PROGRAM ESTABLISHED	PROGRAM IMPLEMENTED	PROGRESS NOTES	POST - TEST	COMPLETED GOAL	PROGRAM RE-CYCLED	DATE PROGRAM IMPLEMENTED	DATE GOAL EXPECTED TO BE ACHIEVED	DATE OF POST-TEST	INDEX OF PERFORMANCE *
SELF HELP SKILLS												
EATING												
TOILET AND WASHING												
TABLE HABITS												
CLEANLINESS												
CARE OF CLOTHING												
MOBILITY												
HEALTH												
OTHER (SPECIFY)												
COMMUNICATIONS												
FOLLOWS SIMPLE COMMAND												
RECOGNIZES OR GESTURES NEEDS												
SOCIAL CONVERSATION												
OTHER (SPECIFY)												
SOCIALIZATION												
OPERATES PEERS/SUPV.												
PLAY ACTIVITIES												
HOME ACTIVITIES												
SHOPPING SKILLS												
SOCIAL SKILLS												
LEISURE PURSUITS												
SEXUALITY												
OTHER (SPECIFY)												
VOCATIONAL												
ACCEPTS RESPONSIBILITY												
DEXTERITY												
AGILITY												
MANUAL ACTIVITIES												
ATTENTION TO TASK												
CARE OF TOOLS & MATERIALS												
QUALITY & ACCURACY OF WORK												
ACCEPTS SUPERVISION												
JOB PLACEMENT												
OTHER (SPECIFY												
ACADEMIC												
NUMBER WORK												
PAPER & PENCIL WORK												
MONEY MANAGEMENT												
TIME AND MEASURES												
READING												
WRITING												
OTHER (SPECIFY)												

HOW HAS CLIENT ADJUSTED TO THE PROGRAM?

HOW WOULD CONTINUATION OF ADAP BE OF BENEFIT TO CLIENT?

WHAT NEEDS SHOULD BE ADDRESSED BY SOME OTHER RESOURCE?

HAVE SPECIFIC NEEDS OF THE CLIENT BEEN MET THROUGH ENVIRONMENTAL OR UNPLANNED METHODS? (DESCRIBE)

OTHER COMMENTS

* MATHEMATICAL RELATIONSHIP OF PRE-TEST & POST-TEST SCORES WHERE POSSIBLE

DSS-1749 (3-76)
Contract Services

SAMPLE FORM

EXTENDED EMPLOYMENT REFERRAL

_____ is referred to the Extended Employment
(name)

Program on _____ by _____.
(date) (name, title)

This Client has worked or received training at workshop since _____.
(date of entry)

Client has received the following services at workshop:

1.
2.
3.
4.
5.
6.

Client now earns $_____ per hour. Client has been earning this wage since

_____.
(date)

Client is now working in _____ area under supervision
(work)

of _____.
(Instructor)

It is recommended that Client be employed by workshop in the EXTENDED EMPLOYMENT PROGRAM.

cc: Extended Employment Program Coordinator
Client File

BEHAVIOR MODIFICATION UNIT IN A SHELTERED WORKSHOP

The goals of this program are two-fold: to increase good work behaviors in sheltered workshop clients and to decrease inappropriate or bad work behaviors in workshop clients. The hope of the program is that each client reaches his maximum work potential.

COMPONENTS:

1. Instructor "Specialist" - This will be a person with some experience in sheltered workshops who has an understanding of the training in Behavior Modification techniques.

   The person will serve dual roles:

   A. As Instructor in an isolated Behavior Modification section where the most severe behavior problem clients are housed--those requiring tight, isolated controls.

   B. As "Specialist" to aid all parts of workshop program in work behavior problem solving. To be available to the staff for help in specific episodes. To have resources to set up change for individuals on the work floor and to give instructors and other staff a better understanding of methods and techniques to use in dealing with work behavior problems when they occur. As a specialist, the Behavior Modification Instructor would then be called on in situations of behavior crisis on the work floor when a new course of action is required.

   Aide - Whenever possible a helper, or aide, should assist the Behavior Modification Instructor in the isolated section. This could be a client able to count, inspect, report, and determine when Behavior Modification Instructor should be called back. The aide serves as a relief person and handles work supervision when Behavior Modification Instructor is on work floor.

2. Space - One room should be used as an isolated Behavior Modification section. Large enough for 8 to 10 clients plus the work space necessary for that number.

3. Program - There will be several facets to the program:

   A. Separate or isolated section

   B. Work crisis intervention and behavior change on work floor

   C. Floor Instructor Program

   D. Controls Program - work with other agencies, group home, parents, involved agency personnel, etc. to promote specific behavior controls at all time and in all places for special problem clients

   E. Staff instruction - program of intermittant instruction for staff to promote a better understanding of the everyday use of methods of Behavior Modification

   F. Placement try-out with prescription written by Behavior Modification Instructor

4. Clients - A. For isolation, B. For work floor program
   A. For isolation unit - 8 to 10 clients will be selected from the population of the sheltered workshop, who have behavior problems which: keep them from being fully productive at their level of intellectual functioning and/or cause them to be unacceptable to the general workshop and/or behavior is of a socially unacceptable quality and/or are destructive to themselves, peers, or property.

   B. For work floor program - When a client is "acting out", disruptive, or an instructor cannot cope with or affect change in bad behaviors, the Behavior Modification Specialist should be called to the scene. She will investigate, observe the behaviors, give a prescription and recommendations and act as supervisor of the prescription to see that the behavior change is worked on correctly and to note or chart progress and determine when program may be changed or discontinued. Reports will be made with floor instructors and to the coordinator or evaluator responsible. Duration will be at Behavior Modification Instructor's discretion.

5. Controls - The Behavior Modification Instructor must have the freedom to effect certain controls or contingencies on the clients in the program.
   A. The isolation group must have some jobs of relatively long (2 weeks or more) which are piece rate if possible.

   B. There must be control of pay, breaks, and other benefits and privileges. In other words, the Behavior Modification Instructor must have liberty to allow or disallow any privilege or pay to client in the program.

   C. Positive reinforcements shall include, for isolation group, token system store, and an occasional outing of Instructor's choice.

   D. Positive reinforcements used on both work floor program and isolation shall include points, verbal reinforcements, charts and counters, pay checks, and various positive reinforcements deemed by Behavior Modification Instructor.

6. Methods - A few of the methods to be used are listed below:
   A. Contingencies (timing, limits) (acceptance of responsibility for one's actions and consequences)

   B. Extinction (i.e., ignore behavior or put reaction in neutral status)

   C. Exchange (you yell - I yell)

   D. Satiation

   E. Aversive Stimuli (i.e., time out)

   F. Praise

   G. Tokens or punches

   H. Group activities

I. Counters (to increase activity)

J. Modeling (Do as _____ does)

K. Shaping (facsimile gets reward)

L. Assertion or substitution (for bad behavior)

M. Charting (Isolate and change behavior)

N. Group or peer pressure

7. Records -

A. Isolation clients will each be evaluated by Behavior Modification Instructor and a report sheet of needed changes - acceleration, and deceleration targets as well as acquisition - will be kept. As changes are made, it will be noted on report how change was affected, baseline data and pertinent charts will be a part of record. Upon referral or move to another program, a prescription will be rendered to the area instructors accepting the client and periodic follow-up checks will be done by Behavior Modification Instructor to reinforce use of prescription and check progress of referred client.

8. Referral -

A. Referral to or from Behavior Modification isolation program will be made through either responsible coordinator or evaluator. They will also be sure that the following records and criteria are forwarded to Behavior Modification Instructor if client is going into isolation program or proper floor instructor if client is moved out of Behavior Modification Isolation Program:

1. Work Habits Rating Form (up to date)

2. Graph or chart of client's problem behavior for at least one day to show frequency of behavior in question

3. Client's behavior must be observed by evaluator or coordinator in addition to instructor

4. There must be some indication or proof that the client could be productive for 6 to 8 hours.

B. Referral to Behavior Modification "Specialist" for immediate floor problems may be made directly to same, as she will then investigate and report actions to proper staff (i.e., coordinator or evaluator).

METRO INDUSTRIAL SERVICES TOKEN ECONOMY

A token economy program was designed and implemented at Metro Industrial Services to motivate the clients to increase their productivity, to reinforce important work habits, such as regular attendance and punctuality, and to provide a better framework for supervisor assessment of a client's productivity patterns throughout the day.

The target behavior to be increased is production rate. Productivity is measured against an established non-handicapped rate, or NHR. The NHR is determined through a time study and analysis of each sub-contract, yielding an average hourly rate at which a non-handicapped worker would be expected to perform. Each month the clients' production rate is measured in terms of the NHR. For example, if a client is working at 50% NHR, he is producing at a rate that is half that of a non-handicapped worker.

Reinforcers in the token economy are privileges and tangible items which the clients may "purchase" at specified times of the day. These include:

Break time outside the work area

Lunch in the lunchroom

Lunch outside or in the TV room

Recreation after lunch

Smoking a cigarette during work time

Conference with a staff member

Store privileges

Food items at the "store"

Any desired item (up to $5.00) for which tokens may be deposited in the "bank"

The medium of exchange in this program, or "tokens" which stand for the back-up reinforcers, are rubber stamp imprints of "MIS" stamped in individual stamp books. Stamps are "spent" when a staff member crosses them out with a pen.

The exchange rules, or economic relationship between the value of stamps ane the cost of the reinforcers, is modified to fit the overall program at MIS. Although prices remain relatively constant, there are sometimes circumstances, such as excessive amounts of "down town", changes in the length of recreation time, etc., which warrant alteration of prices.

Overview of the Token Economy

Prior to implementation of the program, clients' production rates, expressed as NHR, were averages over a three month period. This baseline measure was then used as the basis for an individual's assignment to a particular reinforcement schedule on the token economy program. Clients who performed at a level of 15% NHR and below were placed on Schedule 1; those between 16% and 25% NHR on Schedule 2; between 26% and 35% NHR on Schedule 3, etc. These graduated schedules of reinforcement make it necessary for clients who are better workers to produce a greater quantity of work than these with lower production rates to earn an equal number of stamps.

Each sub-contract job the clients perform has been analyzed in terms of Standard Units of work, with 1 Standard Unit being 10% of the number of parts a non-handicapped person could produce in one hour. For example, if a non-handicapped person could assemble 390 pens per hour, 1 Standard Unit is 10% of 390, or 39 pens, 2 Standard Units is 78 pens, 3 Standard Units, 117 pens, etc. Clients on Schedule 1 receive 2 stamps for each unit of work done; those on Schedule 2 receive 2 stamps upon completion of 2 Standard Units of work, Schedule 3 workers receive 2 stamps for every 3 units of work. Table 1 is a summary of schedule numbers, production rates, and the number of units of work required for reinforcement on the various schedules.

Schedule Number	Percent NHR Range	Number of Standard Units required to earn 2 tokens
1	15% and below	1
2	16% to 25% NHR	2
3	26% to 35% NHR	3
4	36% to 45% NHR	4
5	46% to 55% NHR	5
6	56% to 65% NHR	6
7	66% to 75% NHR	7
8	76% to 85% NHR	8
9	86% to 95% NHR	9

Table 1. Summary of schedule numbers, percent NHR range,aand amount of work required for reinforcement

The pay-off rate was established so that each person should be able to produce the same number of units per hour as the number of the schedule he is on. The token earning rate for everyone is, therefore, approximately 2 stamps per hour. In order to avoid discriminating against those persons who attend adjustment classes during work time, clients receive stamps at a rate of 1 token per half hour for attending, participating in these classes. Additionally, clients can earn one stamp daily for attendance and for punctuality.

As a further incentive, production quotas have been established for each client every day. This was incorporated into the design of the stamp books for each schedule. The number of spaces on the pages of the books for each schedule was planned so that if a person fills his page with stamps by 3:30 p.m. (2:40 p.m. for Work Activity clients), which is one-half hour before the end of the work day, he is actually producing at a rate high enough to move to the next higher schedule. For example, for a client on Schedule 2 to reach his quota, he must produce at a rate which is at least 26% NHR, the lower limit of Schedule 3. Due to differences in the percent change required to move from one schedule to another, clients on different schedules have to earn different numbers of tokens to reach their quotas for the day. Since a higher production rate is a goal of the program, the client receives special privileges if he makes his quota. He is allowed to do anything he wants the last one-half hour of the day, including recreation and TV, or he can choose to continue working and be paid 1½ times his regular earning rate. The filled-page quota also provides the client and supervisor with immediate, concrete feedback regarding the worker's progress during the day. By glancing at his page, one can determine whether he needs to increase his speed in order to fill his page with stamps.

At the end of each month, production rates for that month are computed and new token books are issued. Movement from one schedule to another is based primarily on % NHR, but other factors are also considered, such as complexity of jobs worked on that month, and judgments of the supervisor and adjustment counselor. Advancement to a higher schedule is given careful consideration because in this system there is no regression to a lower numbered schedule. That is, once a person advances to Schedule 4, he cannot return to Schedule 3 even though in ensuing months his production rate may fall below the criterion for Schedule 4.

Group meetings are held at the end of each month and formal recognition is given to the "highest produces" and the "most improved producer." These people's pictures are posted on the bulletin board and remain there for a month. Names are also posted for "honorable mention", these being the persons whose production rates have improved sufficiently to advance them to a higher schedule.

Daily operation of the token economy

Clients arrive at MIS between 8:00 a.m. and 8:30 a.m. They must be clocked in at their work area and ready to work by 8:30 a.m. in order to earn a stamp for punctuality. Supervisors stamp token books for attendance and punctuality during the first few minutes of the work day. Books are then distributed to the individuals along with verbal praise for being present and on time. Reminders are frequently given associating hard work with earning stamps to spend and filling their pages by 3:30 p.m.

Each client works on the job which he has been assigned. He is told how many pieces he has to produce in order to receive stamps. Various methods are used to aid the clients in counting their product, including manual counters, different sized containers for the product, weight counts, etc. When reinforcement is due, the client takes his stamp book and product to the supervisor (or calls the supervisor to his work station if the product is not moveable) and if the product meets quality standards, the supervisor stamps the book and gives verbal praise.

Clients "spend" their stamps for breaks, lunch, recreation, the store, the bank, and other privileges. Work supervisors and other staff members in charge of the various areas cross out the stamps to indicate they are spent.

At 3:30 p.m. (2:40 p.m. in Work Activity) the supervisor announces the names of those persons who have filled their pages and made their quota. They are commended for doing good work and given the option of free time or working for higher pay. Those clients who have not filled their page with stamps continue work as usual until the conclusion of the work day.

The Needs Assessment

There are people in any community who are in need of ADAP services. In many communities, the needs are so extensive that the pressure of a few people whose family members need the services becomes so great that the service gets started and then gradually begins to meet broader needs. However, if an ADAP program is being contemplated, a needs assessment can be of value in gaining funding through local (city-county) sources, as well as state agency sources.

A needs assessment involves primarily the identification of a significant enough need for the service that the expenditure of funds and the development of organizations is well justified. Following are some suggestions on performing a "needs assessment." In North Carolina, the Office for Children may have the majority of information necessary to completing a needs assessment. This agency should be your starting point. In addition:

Find out from the Vocational Rehabilitation Counselors serving your area who are in need of this type of service being developed. Very often the clients who are referred for ADAP services are persons for whom an appropriate service was not available in the locale. (In many cases this person will be in the Area Mental Health Office.)

Get a list of adults from the county DSS office who may be in need of the same type of service and their present status with regard to services offered by this agency.

Develop a list of students who may be in special education (high school age to 16+) who will be needing this service. Youngsters who are 16-18 years old in trainable programs in the schools may be appropriate referral, as well.

From the schools you may also develop a list of persons who are not currently in school due to severe handicaps, etc., who may need ADAP services.

If you develop these lists, you have covered most of the people in the community who are in need of this service. In addition to these contracts you should develop two additional kinds of units.

Develop a list of persons from your county or "locale-to-be-served" who are currently being served in the regional MR center serving your county. Among those persons on the list will be individuals who will need a daytime service in order to be reintegrated into the community. While you are at it, try to find out whether there are individuals who have been placed in the community without benefit of a day program. (Check rest homes and nursing homes as well.)

Develop a list of persons from the psychiatric institution serving your area. Many adults who are mentally retarded are "hidden" populations which are housed in psychiatric facilities. Talk to outreach workers about whether there are people from your locale who are being housed in the institution who are in need of this service. The Mental Health Center in your locale should be able to assist you in this effort.

Summarize

It is not necessary in a grant proposal to specify names, addresses and phone numbers for the potential clients of the ADAP program. You may need to summarize in a general way, perhaps using only the numbers of people needing the service. You may find it helpful to use a chart or figure as an aid. For instance:

Service	Ages 16-21	Ages 21-29	Ages 29 +	Total
Vocational Rehabilitation	7 *	5	2	14
Department of Social Services	8	3	5**	16
Mental Health Center	4	6	2**	12
County School System	12*	0	0	12
Regional MR Center	0	3	7	10
Regional Psychiatric Facility	0	2	10	12
Totals	31	19	26	76

*The 7 potential clients on the list from VR who fall between the ages of 16-21 are also on the list of clients being referred by the schools.

**The 2 potential clients on the list of the Mental Health Center are on the list of clients listed by Social Services as well.

SUGGESTED READING LIST

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ACKNOWLEDGEMENTS

The information and organization of the materials contained herein are the result of a special committee appointed to develop an Adult Developmental Activity Program Manual by the Division of Mental Health Services/ Mental Retardation Section.

The primary purpose as set forth by the committee was to develop a "guide" for those persons interested in the development and operation of a comprehensive day activity program for mentally retarded adults.

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The Committee expresses its appreciation to Brenda Utley and Judy Jackson at Developmental Disabilities Training Institute for the organization and typing of the final manuscript.